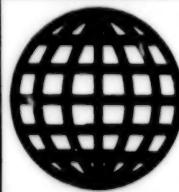


JPRS-TEP-93-021
9 September 1993



FOREIGN
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JPRS Report—

Epidemiology

Epidemiology

JPRS-TEP-93-021

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REGIONAL AFFAIRS

Roundup of Epidemiological Reports for 10 Jun - 6 Aug

AB0908130093

[Editorial Report] The following is a compilation of disease reports monitored from Abidjan Bureau and EAU coverage areas. Source information follows at the end of each item.

Burundi

According to health officials, about 200 people have died since the outbreak of dysentery and more than 50,000 have also been admitted into hospitals. It is unclear why this outbreak is so serious, but poor drinking water, defecating in the open air, and the dry season have all contributed to the spread of the disease. Most of the cases have been reported in the central provinces of Gitega and Muramvya and in the eastern and western parts of the country. [London BBC World Service in English 1705 GMT 6 Aug 93]

Cote d'Ivoire

Current statistics put the number of HIV-positive cases in the country at 1.2 million, of which 14,655 are patients with full-blown AIDS. [Abidjan La Chaine Une Television Network in French 2000 GMT 3 Aug 93]

Ghana

Health authorities have given more details about a skin disease, buruli ulcer, which is said to be attacking people in Amansie-West as well as the Upper Denkyira District of the Central Region. The disease, which was detected in the early eighties, starts as a small painless pimple which progresses to a generalized swelling of the limbs or any part of body. The skin and flesh of the affected part then breaks down and gets rotten, leaving a large ulcerated sore, which takes more than a year to heal and leaves the victim deformed. The causative organism is known as *microbacterium ulcerans* and it is similar to the one which causes tuberculosis. The mode of transmission is not known yet. [Accra Ghana Broadcasting Corporation Network in English 2000 GMT 1 Aug 93]

Ethiopia

The number of HIV carriers in Ethiopia is reported to have reached 500,000. The updated data on AIDS in Ethiopia was released on 17 June during a joint meeting of health professionals and artists who were convened to discuss ways of stepping up the campaign against the disease. Opening the meeting, Deputy Health Minister Azeb Tamirat called on Ethiopian artists to use their professional skills to impress upon all citizens the need to safeguard themselves from the incurable disease. [Addis Ababa Voice of Ethiopia in English to Neighboring Countries 1530 GMT 18 Jun 93]

Kenya

Health Minister Joshua Angatia has said that a total of 35,000 AIDS cases have been reported since the first case

was diagnosed in the country in 1984. In a speech read on his behalf by Assistant Minister Gideon Mutiso during the official opening of a 2-day Kenya Enrolled Nurses Association conference in Mombasa, Mr. Angatia warned that the situation was critical and required concerted efforts by all to further curb the spread of the disease. He said success against AIDS infection depends on altering human behavior which results in HIV transmission, adding that AIDS represents the greatest challenge to the human race. [Nairobi Kenya Broadcasting Corporation Network in English 1000 GMT 10 Jun 93]

Tanzania

Deputy Health Minister Zakia Meghji has said that 1 million people in the country are feared to have the AIDS virus and that people between the ages of 15 and 45 are the most vulnerable. Honorable Meghji said if AIDS continues to spread at the present fast rate it threatens to cause an 18 percent decline in the national economy as the youth, who are the mainstay of the work force, are the ones most adversely affected by the disease. Hon. Meghji, who was presenting a paper on AIDS at a 5-day seminar of the Dar es Salaam Christian Women Leaders' Association in Dar es Salaam, said that 7 percent of women and nearly 6 percent of men who donate blood have the AIDS virus. These figures were obtained by examination of donated blood prior to administration to patients. [Dar es Salaam Radio Tanzania Network in Swahili 1700 GMT 16 Jun 93]

Three more people have died of cholera in Dar es Salaam while 79 others are now in hospitals in the city. These deaths bring to 26 the number of people who died of the disease between 3 and 19 July. A statement issued by Dar es Salaam Regional Commissioner Mustafa Nyanganyi to reporters on 19 July said the extent of the disease was still unclear but that the number of cholera cases was beginning to show signs of a decline. Hon. Nyanganyi said according to the 19 July statistics new cases declined from 17 on 18 July to 13, while the number of those admitted in hospital fell from 93 to 79. [Dar es Salaam Radio Tanzania Network in Swahili 0700 GMT 20 Jul 93]

Roundup of Epidemiological Reports for 19 - 25 Jul

MB2507172693

[Editorial Report] Following is a compilation of reports monitored by FBIS Mbabane Bureau from 19 to 25 July concerning outbreaks of and reports on various diseases. Items are listed by country and disease. Source follows each item.

Botswana

Measles—An outbreak of measles has been reported in the north-east. The district medical officer recently said that fifty-nine cases of measles have so far been reported, but there has been no reported deaths. She said most of the affected people are aged between four and 39 years, and that action has been taken to fight the outbreak. (Gaborone Radio Botswana Network in English 1110 GMT 19 Jul 93)

Mozambique

Dysentery—Five cases of dysentery are reported daily at the Ocone health post in Inhassunge District. The nurse in charge of that health post has expressed concern with the situation due to the lack of medicines to treat that type of disease. Dysentery has been on the increase in most of Zambezia Province due to worsening sanitary problems. (Maputo Radio Mozambique Network in Portuguese 1030 GMT 22 Jul 93)

Diarrhea—In the Moianine location of Gaza Province's Bilene District, 11 of the 39 people suffering from diarrhea with traces of blood are undergoing intensive medical care at the Macia health post. DOMINGO reports that an epidemic of diarrhea with traces of blood broke out in the region after residents consumed wild roots during a shortage of food. (Maputo Radio Mozambique Network in Portuguese 0800 GMT 25 Jul 93)

Zimbabwe

HIV, AIDS—About 15 per cent of the adult population in Zimbabwe's Mashonaland West Province are HIV positive, a fourfold increase in the last five years, a spokesman for the Ministry of Health and Child Welfare said in Chinhoyi, ZIANA national news agency reported on Tuesday. The Health Ministry and United Nations Children's Fund has launched an education campaign to make the provincial population of about 1.1 million aware of the dangers of HIV and AIDS. (Johannesburg SAPA in English 0820 GMT 20 Jul 93)

Roundup of Epidemiological Reports for 2 - 8 August

MB0808161693

[Editorial Report] Following is a compilation of reports monitored by FBIS Mbabane Bureau from 2 to 8 August concerning outbreaks of and reports on various diseases. Items are listed by country and disease. Source follows each item.

Mozambique

Diarrhea in Nampula Province—Nineteen people have died of diarrhea in Mogovolas District. The deaths occurred between May and July. Health officials in Mogovolas say that more than 500 cases of diarrhea and vomiting were reported in the district during that period. NOTICIAS quotes officials in the district as saying that the situation is better in recent days. (Maputo Radio Maputo in English 1800 GMT 3 Aug 93)

Measles in Cabo Delgado Province—Eleven children died of measles in the province in the first semester of 1993. About 260 measles cases were recorded in the same period. Reports from Cabo Delgado state that the outbreak has already been controlled by the health authorities. (Maputo Radio Mozambique Network in Portuguese 1030 GMT 3 Aug 93)

Roundup of Epidemiological Reports for 9 - 15 Aug

MB1508165593

[Editorial Report] Following is a compilation of reports monitored by FBIS Mbabane Bureau from 9 to 15 August concerning outbreaks of and reports on various diseases. Items are listed by country and disease. Source follows each item.

Mozambique

Cholera in Zambezia Province—“At least 62 people died of cholera in Zambezia Province in the first quarter of 1992. A report issued by the provincial government says more than 3,000 cholera cases were diagnosed in the province during the same period.” (Maputo Radio Mozambique Network in Portuguese 1730 GMT 11 Aug 93)

Malaria in Inhambane—“The number of people who died of malaria in Inhambane Province in the first six months of 1992 was almost five times higher than in the same period last year. In the first half of this year 126 people died of malaria, compared to 28 in the same period last year. A report from the health directorate states that in the same period more than 1,400 malaria cases were recorded, compared to 665 in 1992.” (Maputo Radio Mozambique Network in Portuguese 1030 GMT 12 Aug 93)

Aids in Zambezia Province—“Provincial Health Director Domingos Diogo has revealed that the number of people infected with the AIDS virus is increasing. He also noted that unless there is urgent intervention, the situation could reach high proportions. Tests carried out in the Quelimane Provincial Hospital in January recorded 42 cases of AIDS virus carriers.” (Maputo Radio Mozambique Network in Portuguese 1730 GMT 14 Aug 93)

South Africa

Meningitis near Cape Town—“Three primary school pupils from Kraifontein near Cape Town have been admitted to hospital with symptoms of viral meningitis....Parents have been warned to be on the lookout for similar symptoms among their children.” (Johannesburg Radio South Africa Network in English 1600 GMT 9 Aug 93)

Zambia

Meningitis in Kitwe—“Health authorities in Kitwe have finally managed to contain the outbreak of meningitis which hit the city last month. Kitwe City Council Director of Health, Dr. Wadro Kapula, says nine patients have so far died from meningitis at Kitwe Central Hospital. He has described the situation as stable. The number of patients admitted at Kitwe Central Hospital is 31.” (Lusaka Zambia National Broadcasting Corporation Network in English 0500 GMT 12 Aug 93)

Roundup of Epidemiological Reports for 16 - 22 Aug
MB2208183593

[Editorial Report] Following is a compilation of reports monitored by FBIS Mbabane Bureau from 16 to 22 August concerning outbreaks of and reports on various diseases. Items are listed by country and disease. Source follows each item.

Angola

AIDS—Dr. Teresa Coa, from the Organization of African Women Against AIDS, says that in Angola about 700 AIDS cases have been recorded. If we calculate through World Health Organization methods, that is 700 times 100, there should be about 70,000 people infected with the AIDS virus at present. (Luanda TPA Television Network in Portuguese 1930 GMT 18 Aug 93)

Mozambique

AIDS—Out of every 100 people in Mozambique, between eight and 10 are HIV positive. This was reported by the coordinator of the Mozambique Red Cross AIDS Program at the national seminar on sexual education programs currently under way in Maputo. (Maputo Radio Mozambique Network in Portuguese 1730 GMT 16 Aug 93)

Cholera in Manica Province—Forty-four people died in Guro District between the end of last year and January of this year. Manica Provincial Governor Artur Canana learned this from Guro District Administrator Costa Francisco Chale. (Maputo Radio Mozambique Network in Portuguese 1730 GMT 16 Aug 93)

Diarrhea in Manica Province—"Diarrhea has killed nine people in the Macate administrative area during the first half of this month. Diarrhea killed 12 people in the area last month." (Maputo Radio Mozambique Network in Portuguese 0500 GMT 21 Aug 93)

Diarrhea in Gaza Province—Seventy cases of diarrhea have been detected in Chicualacuala District over the last three months. Most of those cases were recorded in areas with no health posts. (Maputo Radio Mozambique Network in Portuguese 1730 GMT 22 Aug 93)

Dysentery—A total of 10 people have died of dysentery in the wards of Chimoio city, and Machipanda, capital of Messica administrative region in Manica District since July. Messica Health Department Director Manuel Jorge says sewage works are underway in neighboring villages and wards to fight the disease. The work is being carried out by cadres from social organizations, traditional doctors, and religious figures. (Maputo Radio Mozambique Network in Portuguese 0800 GMT 19 Aug 93)

Dysentery in Manica Province—in Sussundenga District 20 people have died of dysentery since the beginning of 1993. The victims include four children. (Maputo Radio Mozambique Network in Portuguese 1730 GMT 21 Aug 93)

Malaria in Maputo Province—A total of 68 people died of malaria, and seven others of malnutrition in Maputo

Province's Manhica District between January and June. (Maputo Radio Mozambique Network in Portuguese 1030 GMT 19 Aug 93)

South Africa

TB—"Rampant" TB is reportedly affecting the country. Recent figures show that "at least 36 people die of TB every day," says Dr. Tennyson Lee of the Center for Health Policy at Wits University. Statistics also reveal that the incidence of TB has risen from 290 to 364 per 100,000 people. Soweto Baragwanath Hospital reports that 37 percent of HIV positive patients are also TB positive, while 80 percent of TB positive patients are also HIV positive. (Johannesburg SUNDAY NATION in English 22 Aug 93 p 21)

Swaziland

AIDS—The disease is said to be killing babies at an "alarming rate," according Deputy Director of Health Services Dr. Qhing Dlamini. She noted that part of the problem is that children between the ages of 5 and 14 are already sexually active. She added that the majority of AIDS cases in the 0-4 and 15-19 year age brackets are girls. (Mbabane THE TIMES OF SWAZILAND in English 16 Aug p 3)

Leprosy—Health authorities in Swaziland say leprosy has been virtually eradicated in the kingdom. A staff member of the Leprosy Clinic in Mbabane, Mr. Simon Dube, told reporters that there were now only 12 Swazis suffering from the disease compared with more than 640 over a decade ago. He said the improved situation was a result of better health awareness and modern drugs. (Johannesburg Channel Africa Radio in English 1600 GMT 19 Aug 93)

Zimbabwe

Sleeping Sickness in Mashonaland—"Sleeping sickness [nagana] caused by tsetse flies is spreading at an alarming rate in the Guruve area, according to a senior animal health inspector in Zimbabwe's Mashonaland Province. ZIANA national news agency on Saturday quoted the NEHANDA GUARDIAN, a provincial publication, as saying that cases of the disease had increased from less than 20 last year to 96 in the first half of this year. This was due to the increased breeding of tsetse flies in the Zambezi Valley in lower Guruve." (Johannesburg SAPA in English 0834 GMT 21 Aug 93)

Roundup of Epidemiological Reports for 23 - 29 Aug
MB2908190793

[Editorial Report] Following is a compilation of reports monitored by FBIS Mbabane Bureau from 23 to 29 August concerning outbreaks of and reports on various diseases. Items are listed by country and disease. Source follows each item.

Mozambique

Tuberculosis—Some 60,000 cases of tuberculosis were detected in the country between 1989 and 1992. Radio Mozambique has learned this from Alfredo Machatine,

head of the Health Ministry Tuberculosis and Leprosy Department. Machatine added that about 3 percent of tuberculosis cases cause death. (Maputo Radio Mozambique Network in Portuguese 1730 GMT 29 Aug 93)

Zimbabwe

AIDS—Figures just released in Zimbabwe show that 509 cases of AIDS have been reported among girls between the ages of 15 and 19 years in the first six months of this year. Zimbabwe's National AIDS Coordination Program said an increasing number of girls in this age group were contracting AIDS and that the problem required urgent attention. (Johannesburg Channel Africa Radui in English 1100 GMT 28 Aug 93)

GHANA

Five Eastern Districts Onchocerciasis Endemic

93WE0539A Accra PEOPLE'S DAILY GRAPHIC
in English 29 Jun 93 p 8

[Article by Ransford Tetteh and Dwamena Bekoe, Kyebi Apapam: "Oncho Endemic Districts Identified"]

[Text] Five districts in the Eastern Region have been declared Onchocerciasis (river blindness) endemic areas.

The districts are East Akyem, Kwahu South, Birim North, Birim South and Akuapem South.

Mr. E.W. Awuku, Senior Technical Officer in charge of the Epidemiology Division of the Ministry of Health in the East Akyem District, told journalists that microscopic examination conducted by the division revealed the high rate of infection in these districts.

He was speaking at Kyebi Apapam in the East Akyem District last Tuesday shortly before a team from the division, the National Onchocerciasis Secretariat and the Lions Club conducted clinical check-ups and administered drugs to about 323 people in the town.

The Lions Club has been assigned responsibility for the distribution of the drug called *Ivermectin* with long-lasting effect on the disease and the control of oncho in the Eastern Region.

Mr. Awuku said that oncho is not only associated with the Savannah belt, since fast-flowing rivers in the forest belts have also been found to breed the Blackfly or the Simulium Fly which spreads the disease.

He described the Savannah type as capable of causing blindness, while the forest type is not likely to cause blindness to the person affected unless he is very close to a river in which the parasite load is very high.

16 Die After Eating Anthrax-Infested Meat

93WE0539B Accra PEOPLE'S DAILY GRAPHIC
in English 30 Jun 93 p 1

[Article by Iddrisu Seini, Paga]

[Text] Sixteen persons have died in the Pelungu and Duusi areas in the Bolgatanga District for eating anthrax-infested carcass of cattle.

Fifteen others with symptoms of anthrax have been treated with antibiotics.

According to Dr. Kwame Adogboba, Regional Director of Health Services in charge of the Upper East Region, 150 other cases had also been identified and had been given prophylaxis antibiotics.

He said the first report on the anthrax outbreak was made by Sister Gerdy van Noort of the Presbyterian Mobile Health Unit and that two visits were subsequently made to the affected areas.

He said it was detected that the carcasses were dressed and sent to the Pelungu market for sale to individuals and market women and food sellers.

Dr. Adogboba expressed regret that the people did not consult the Environmental Health Officer in the area for his advice.

In another interview, Dr. Francis K. Adu, Regional Veterinary Office, said 37 cattle had died between June 2 and 23 as a result of the outbreak of the disease.

He said personnel of his outfit moved to the affected areas as soon as the news about the outbreak of the disease reached them and started vaccination of the animals against the disease.

Dr. Adu said 1,830 out of a total of 2,180 cattle, 400 sheep and 207 goats in the affected areas have so far been vaccinated.

He said as at now, the situation is under control.

Meanwhile, the Ministry of Food and Agriculture has placed a ban on the movement of livestock in the affected areas within a radius of eight kilometres.

Slaughtering of cattle, sheep, goats, pigs and donkeys for consumption has equally been banned in those areas.

Livestock owners in the Nabdam area have also been advised to make their animals available for vaccination against the disease.

KENYA

Brucellosis Outbreak Reported in Narok

93WE0498A Nairobi THE KENYA TIMES in English
11 Jun 93 p 13

[Text] An outbreak of disease brucellosis transmitted from cows to human beings through the consumption of raw milk and meat, has been announced in Narok District.

Narok District Public Health Officer James said 29 people have been diagnosed for the disease and are undergoing treatment at the Narok District Hospital.

Addressing members of the district executive committee which was chaired by the District Officer, Mr James Mengera, at the Narok Town Council Hall yesterday, the

public health officer said the spread of the disease in the district posed a serious problem.

Mr Thuo urged the extension workers and public officers in the district to educate the residents on the need to boil milk and also roast their meat well as a measure to curb the disease.

He expressed fears that many people may have been infected with the disease, adding that drugs to treat it were running out of the supply at district hospital. A person who has tested positive to the disease must receive 21 injections of antibiotics, said Mr Thuo.

The acting District Veterinary Officer, Mr David Irura, said the only way to control the cattle disease was through artificial insemination as it is sexually transmitted.-KNA

NIGERIA

Cholera Outbreak in Osun State Kills 20

93WE0538A Lagos *THE GUARDIAN* in English
3 Jul 93 p 4

[Article by Ifedayo Sayo, Osogbo: "Cholera Kills 20 in Osun"]

[Text] An outbreak of cholera in some parts of Osun State has killed about 20 persons.

The epidemic which broke out some weeks ago at Agungun Village in Ayedade council area has spread to neighbouring villages.

Other neighbouring villagers had fled in fear of the epidemic contagious nature.

To check the spread of the disease, the state government in a statement yesterday informed the people to boil and filter water before drinking.

Health officers have been despatched to the affected villages to control the spread.

ZAMBIA

Cholera, Dysentery Under Control in Luapula

93WE0537A Lusaka *TIMES OF ZAMBIA* in English
8 Jul 93 p 2

[Text] Medical authorities in Luapula Province have controlled dysentery and cholera and are optimistic the disease would not recur after completion of modifications on sanitation system.

Provincial Medical Officer Dr. Lendy Kasanda said in an interview yesterday since the disease came under control in April it had not resurfaced and all was being done to prevent the disease from recurring.

The control was attributed to regular supply of chlorine for water treatment and improved drug supply, which has even been extended to the most remote parts of the province which were the most hit.

Another contributing aspect was the improved transport situation. Every district has not less than three vehicles operating.

The vehicles are used to deliver drugs, chlorine and other essential pre-requisites to distant places.

Dr. Kasanda said the medical authorities were not resting and have repaired a boat engine for Samfya which would facilitate the tour of swampy areas not accessible by road.

He thanked Japanese International Cooperation Agency (JICA) which provided most spare parts for repair works for such ventures.

To reduce costs, Dr. Kasanda said the department had its own workshops where the works were undertaken.

Fishermen would be encouraged to use "modern" and hygienically approved modes of sanitation.

Medical Stores has been praised too for regular supplies of medical requirements to the area.

'Out of Control' Menengitis Epidemic Kills 110 Since July

MB2508170693 Johannesburg Channel Africa Radio in English 1600 GMT 25 Aug 93

[Text] More than 1,200 people have contracted menengitis in an epidemic in Zambia that has killed 110 people so far. A report from Lusaka says the Copperbelt has been worst hit with the provincial capital, Ndola, recording 86 deaths since the epidemic broke out in July. Dr. Roy Chimba of the Ministry of Health says the disease appears to be out of control. He said Ndola alone recorded 126 cases yesterday. Medical officers have attributed the rise in the number of menengitis cases to the high incidence of the AIDS virus.

Anthrax Outbreak Reported in Senanga

93WE0537C Lusaka *TIMES OF ZAMBIA* in English
25 Jun 93 p 2

[Text] An outbreak of the dreaded anthrax disease has been reported in Senanga district and seven cattle have so far died.

This was reported on Wednesday by Western Province veterinary officer Dr. Geoffrey Bbalo during a meeting held in Mongu to review the fight against anthrax.

Dr. Bbalo said the worst hit area was Kaunga Lueti west of Senanga boma although the disease was of much concern in Western Province.

He told the meeting that no vaccines had been sent to Kaunga Lueti since the disease first broke out last year and farmers in the area did not approach his department for assistance.

A follow-up on mass vaccination against the disease on cattle would be made soon.

ZIMBABWE**New Cholera Outbreak in Zambezi Valley**
*93WE0497C Harare THE HERALD in English
25 May 93 p 1*

[Text] The Mashonaland Central medical officer has reported that there has been a fresh outbreak of cholera in some parts of Lower Guruve.

Dr Van Geldermalsen, a provincial epidemiologist, said yesterday that two deaths and 13 cases of cholera had been reported from Mauhwe and Hwata areas of the Zambezi Valley.

He said the outbreak came at a time when all cases of cholera had died out and added that manpower and drugs had been rushed to the affected areas. He warned villagers against transporting their affected relatives over long distances as this would result in the spread of the disease.—ZIS.

121 Deaths From Malaria Thus Far This Year
*93WE0497A Harare THE SUNDAY MAIL in English
6 Jun 93 p 5*

[Text] More than 137,000 people have been attacked by malaria since January this year, the Minister of Health and Child Welfare, Dr Timothy Stamps, has said.

In an interview with THE SUNDAY MAIL last week, Dr Stamps said 137,413 malaria cases were reported throughout the country and 121 people died, most of them children since the beginning of the year.

"Chloroquine resistant malaria has broken out in some parts of the country in growing proportions," he said.

The chloroquine resistant malaria surfaced from countries in the east and north-eastern sides of Zimbabwe. In Kenya, where the disease is already an epidemic, health authorities were forced to ban the use of chloroquine.

Dr Stamps said that alternative malaria drugs had once been in short supply "but the stocks of quinine sulphate and fansdar have since improved."

"The only problem is distribution to the various clinics, in every part of the country."

He said malaria cases would go down, during this cold weather, when there is no malaria transmission, in most parts of the country.

The minister, however, warned that malaria levels in the Zambezi Valley and Manicaland border areas would not change, "as transmission occurs throughout the year."

Meanwhile, six people have died from cerebral malaria at Kadoma General Hospital and more than 6,000 cases have been treated during the past three months, the Acting District Medical Officer, Dr M.E.K. Youssef, said.

Doctor Youssef told THE SUNDAY MAIL last week that 16 people had died and 2,789 cases had been treated during the same period last year.

Sharp Increase in Malaria in Bulawayo
*93WE0497B Harare THE HERALD in English
20 May 93 p 13*

[Text] Bulawayo—Malaria, tuberculosis, sexually transmitted diseases and AIDS infection continue to increase in Bulawayo despite efforts by health authorities to curb their spread.

The director of health services, Dr Barnett Nyathi, said a record 363 cases of malaria were recorded in Bulawayo alone during the first three months of this year, compared to 53 cases in 1992.

"Many travellers coming to Bulawayo during this period did not take any precautions and this resulted in a sharp increase in the number of malaria cases," said Dr Nyathi.

He said apart from people being attended to at city council clinics and hospitals, his department always advised people to take malaria prevention tablets when travelling to mosquito-infested areas.

Of the 363 cases, only five were of people resident in Bulawayo and had not travelled anywhere, he said.

Dr Nyathi said the rains that fell late last year had also increased the chances of contracting malaria unlike last year when weather conditions were dry.

Tuberculosis cases and deaths related to the disease had constantly increased since 1987.

"From January to March this year, a total of 380 cases have been reported in the city compared to 323 during the same period last year."

STD and AIDS-related deaths were also on the increase. During the first 3 months of this year 264 AIDS cases have been diagnosed from 150 women and 114 men.

To fight STD, the city council has sought donor assistance to establish a training and referral centre at its Khami Road Clinic—Ziana.

New Strain of Vibrio Cholerae Found

93WE0439D Beijing JIAN KANG BAO in Chinese
14 Mar 93 p 3

[Article by Kuang Yuanshen [0562 6678 3234] and Liu Haining [0491 3189 1337]; "China Discovers a New Pathogen"]

[Text] The Laboratory Department of Beijing Tiantan Hospital with the assistance of Professor Chen Tian-shou of the National Institute for the Control of Pharmaceutical and Biological Products, recently isolated from the feces of acute diarrhoea patients six new vibrio strains of non-O1 Vibrio cholerae which are resistant to the vibrio inhibitor (O/129). After investigation, the Information Department of the Chinese Academy of Medical Sciences confirmed the discovery being the first in China.

Pathogenic vibrio is one of the pathogens that cause human acute diarrhoea. A large proportion of the vibrios belongs to the non-O1 Vibrio cholerae. The vibrios can cause endemic enteritis. In recent years, other countries have issued reports about vibrios resisting vibrio inhibitor (vibrios are non-O1 Vibrio cholerae). China's understanding of this pathogenic vibrio is still in theory only. During the cholera monitoring period since July 1992, the Enteritis Clinic Lab of the Laboratory Department of Beijing Tiantan Hospital detected in the feces specimens of 991 acute diarrhoea patients a great amount of bacteria colonies in rapid darting movement but not agglutinating with the O1 group V. cholerae polyvalent serum. Routinely, the bacteria strains unrelated to Vibrio cholerae were discarded; however, the researchers saved these bacteria strains for concentrated observation. Twenty-five different biochemical tests were conducted respectively on these 182 pathogenic vibrio strains. Serotypes of six vibrio strains suspected to be non-O1 Vibrio cholerae were identified. The results proved that these non-O1 Vibrio cholerae, which had the same morphology and the same biochemical reactions as those of the O1 Vibrio cholerae but had different seral reactions, were resistant to vibrio inhibitors in various degrees. Researchers also performed drug resistance tests of these six vibrio strains. The non-O1 Vibrio cholerae strains had the characteristic of resisting compound sinomin, an indication that they differed sharply from the sensitive strains.

Professor Chen Tianshou believes that the discovery is highly significant to clinic laboratory medicine and epidemiological survey in China. It provides direction to the future diagnosis, treatment, and prevention of cholera and other diarrhoea diseases. He suggested that health and epidemic prevention departments should pay special attention to the finding.

Malaria Epidemic Situation Stable

93WE0439A Beijing JIAN KANG BAO in Chinese
4 May 93 p 3

[Article by Zhao Lianzhou [6392 6647 3166]; "Realistic Malaria Prevention Experts Remind All Regions Not To Regard Malaria Epidemic With Blind Optimism"]

[Text] In the global picture where most countries have increasing malaria cases, how is the malaria epidemic situation in China? At the State Malaria Epidemic Analysis Symposium held in Zhengzhou, Henan, over 50 malaria prevention experts and personnel expressed their opinions as follows: There is good news about China's malaria situation, yet there are still apprehensions; all regions should firmly preserve present achievements and seriously ward off malaria's sudden spread.

Based on provincial malaria epidemic statistics of last year, the symposium attendees stated that China's situation had been stable since 1990. There has been a drop of about 28 percent since the year before last. All provinces, cities and regions with the exception of two provinces (or regions) have seen various degrees of decrease of malaria morbidity. However, the experts are still concerned over the malaria situation because: First, malaria has the characteristics of spreading rapidly and recurring easily. Although the average morbidity of malaria in China has dropped to below 1/10,000, any slight relaxation and carelessness could make sharp increases possible. Second, with wide promotion of the "reform and opening up" policy, there has been a great increase in population mobility, especially among people from the interior and the north moving to the southern malaria epidemic regions to work. Lacking prevention measures and personal health care, the workers who are infected with malaria can easily become infection sources when they return home; according to reports by the provinces about 95 percent of malaria patients were infected by outside sources. Third, the malaria prevention contingency is unstable due to low compensation. Fourth, investment in malaria prevention is reduced because some local authorities think that malaria prevention is unimportant because malaria morbidity is declining. Thus, tightening of the prevention budget makes it difficult to further control and reduce the onset of malaria.

The symposium attendees pointed out: All regions should further promote the understanding that malaria prevention is a long-range and difficult task; increase investments in malaria prevention; adopt the "tilting toward betterment" policy; stabilize the professional contingent; persist in the coordinated prevention measures that serve different regions; reinforce malaria administration among the mobile population; improve the nation-wide monitoring system; and strictly guard against regional epidemic outbreaks. All levels of malaria prevention organizations should establish new policies to deal with new situations, reinforce existing achievements, expand the malaria-free zone, and make efforts to control and eliminate malaria.

Report on Current Measles Epidemic Situation

93WE0439C Beijing YIYAO XINXI LUNTAN [CHINA MEDICAL TRIBUNE] in Chinese Vol 19 No 16, 29 Apr 93 p 3

[Article by Xia Yang [1420 7122]: "New Trends of Measles Morbidity in China"]

[Text] Duan Shucheng of the Children's Hospital of Shanghai Medical University reported that after the use of measles vaccine and the popularization of planned immunization, the morbidity and mortality of measles patients decline rapidly. However, following this improvement, measles morbidity appears to shift to higher aged groups. Measles seasons become non-distinctive, and the ratio of post-immunization atypical measles is rising. This makes diagnosis so difficult that serological or other diagnostic procedures have to be used.

In recent years, measles epidemics have occurred sporadically or in the form of breakouts in many areas. The epidemic characteristics are: There is an increase of adult patients, most of whom are 20 to 30 years old; an increase of congenital measles of newborn babies delivered by pregnant women with measles; and infant (mostly before the baby is 8 months old and before the first dose is given) measles increases but the mortality is low. The increase of measles morbidity of older children and infants is related to the yearly decline of their immunity after their vaccination as well as the decrease of acquired immunities from their mothers. Pre-school children and young adults who have been given primary immunization must receive their booster shots on schedule when they reach their adulthood. Those who live collectively especially need to repeat the vaccination. In some regions, measles re-vaccination of new college students, pre-school and primary school students from other areas has achieved good results. Planned immunization for infants of the mobile urban population must also be dealt with as soon as possible.

Scarlet Fever-Like Disease Caused by Streptococcus Mitis

40091017F Shanghai ZHONGHUA CHUANRANBING ZAZHI [CHINESE JOURNAL OF INFECTIOUS DISEASES] in Chinese Vol 11 No 2, May 93 pp 68-71

[English abstract of article by Zhu Bai [2612 4101], Sun Xinghai [1327 5281 3189], et al. of Haian County People's Hospital, Jiangsu Province]

[Text] An outbreak epidemic of scarlet fever-like disease occurred in Haian and some other areas of Jiangsu Province from late fall 1990 to spring 1991, in which thousands

of cases were involved. The onset of the illness was abrupt, toxemia was rather severe, and the patients were predominantly young and middle-aged men. The severe cases had shock in different degrees, some even developed coma. All the patients had congestive macules, followed by desquamation during convalescent period, but none had typical symptoms of pharyngitis. The WBC count, mainly neutrophilic granulocytes, increased obviously. Liver and kidney damage occurred in a few cases. Larger doses of penicillin G treatment is effective in curing the disease, the prognosis is excellent. It was believed that this scarlet fever-like disease was caused by streptococcus mitis, as proved by isolation of the pathogen and antibody test. Database search found that no similar cases have been reported.

Outbreak of Hoof-and-Mouth Disease 'Under Control'

HK0408040293 Beijing CHINA DAILY in English 4 Aug 93 p 3

[Report by staff reporter: "Foot-and-Mouth Alert in South"]

[Text] An outbreak of foot-and-mouth disease has been brought under control in South China, sources in the Ministry of Agriculture said.

The disease was discovered in June and early July in Longling County in Yunnan Province and Wenchang County in Hainan Province.

Four infected oxen in Longling County and 114 pigs in Wenchang County were immediately destroyed, said an official from the Livestock Husbandry and Veterinary Department under the ministry.

Another 206 pigs which had been in contact with those affected by the disease were also killed and buried, the official said.

"The local authorities and stock epidemic prevention stations have closed off the epidemic spots and are keeping a close watch on them," he said.

No more such cases were reported in elsewhere. The ministry and local governments have taken preventive measures nationwide.

As member of the United Nations Food and Agriculture Organization and World Health Organization, China will report the outbreak to the two organizations and other related departments.

China found two cases of foot-and-mouth disease in Guangzhou in 1986 and Shenzhen in 1990, both in South China's Guangdong Province.

REGIONAL AFFAIRS

Regional Epidemiology Roundup for 10 - 24 Jul BK2907141293

[Editorial Report] The following is a compilation of summaries of foreign media reports on Southeast Asian and South Asian Epidemiology developments monitored by Bangkok Bureau from 10 to 24 Jul 1993. Sourcelines are given in parentheses after each item.

Australia

Kidney Disease Afflicting Aborigines

The Australian medical journal says kidney disease among Northern Territory aborigines is seven times higher than the national average. Aboriginal people are also affected on average 10 years earlier in age than the wider community. Aboriginal people are prone to kidney disease because of poor nutrition, obesity, and a higher rate of diabetes. A program to alter diet and exercise patterns has been urged to reduce the incidence of kidney failure, but immediate intervention by the government is needed. [Melbourne Radio Australia in English 0500 GMT 19 Jul 93]

Burma

School Educational Panel Discusses AIDS

An educational panel discussion on AIDS, jointly sponsored by the Rangoon Division Health Department and Insein Township School Health Department, was held recently. It was attended by teachers and students while Health Education Department officials took part in the discussions. [Rangoon Radio Burma in Burmese 0630 GMT 21 Jul 93]

Laos

Epidemics Take Toll in Savannakhet Province

Ninety-two people in two districts in Savannakhet Province died of malaria, measles, and diarrhea in May. Sixty-one percent of patients receiving blood tests were found to be afflicted with malaria viruses, and from 15 to 30 May, 10 people died of malaria.

Residents of six villages in Thung Kok in Savannakhet were recently afflicted with measles. Six of 128 children suffering from the disease have died. Also, a diarrhea epidemic in nine villages along Route No. 9 has claimed 30 lives.

In Phin District in Savannakhet in May, 1,285 people in 12 villages suffered from diarrhea and 46 lost their lives. (Vientiane Vitthayou Hengsat Radio Network in Lao 1200 GMT 20 Jul 93)

Fifty Die of Malaria in Sing District

In Sing District, Luang Namtha Province, an epidemic of malaria has broken out over the past two months in Hmong and Lao Theung villages in the Pa Kha and Lak Kham areas. In the past two months, 50 have died from the disease. The worst case affected Ban Don Mai where 30 people died. The Public Health Service of Sing District has

urgently sent medical cadres to educate the people and help put an end to the deadly epidemic. (Vientiane Vitthayou Hengsat Radio Network in Lao 1200 GMT 13 Jul 93)

Malaria Outbreak Spreading in Sayaboury Province

Malaria is spreading extensively in Ban Dong Louang in Phiang District, Sayaboury Province, and one person has died of the contagious disease. Seventy-seven percent of 435 people who received blood tests were afflicted with malaria viruses. (Vientiane Vitthayou Hengsat Radio Network in Lao 0000 GMT 21 Jul 93)

Thailand

Infants Contracting HIV From Mothers

According to the Public Health Ministry, from 1988 to 1992 infants contracting HIV from their mothers numbered 2,973—372 in the northern region, 237 in the central region, 48 in the south, 85 in the northeast, and 286 in Bangkok. From May 1992 to 30 June 1993, 610 infants in the northern region contracted HIV from their mothers who were former prostitutes. Thirty of these infants have already died. (Bangkok MATICHON in Thai 15 Jul 93)

AIDS Training Course Held for District-Level Officials

A total of 397 district-level officials from 14 northern provinces attended a two-day training course on drafting AIDS prevention and control plans held by the Interior Ministry in Chiang Mai. The training will provide senior officials at the district and municipal levels with knowledge about AIDS, and they will subsequently devise a three-year plan to control and prevent the spread of the disease in all northern districts and municipalities. (Bangkok BANGKOK POST in English 21 Jul 93)

Vietnam

Ho Chi Minh City Discovers 460 HIV-Infected Cases

As of 5 July, Ho Chi Minh City has discovered 460 people infected with HIV, including 318 drug addicts who account for 93.8 percent of the total number infected. (Hanoi Voice of Vietnam Network in Vietnamese 1100 GMT 10 Jul 93)

Song Be Province Increases Funding for AIDS Prevention

Song Be Province recently spent 700 million dong for an anti-AIDS program. With this funding, the provincial health care service purchased more medical equipment for blood testing. The province also set aside 200 million dong for an education program on AIDS. (Hanoi Voice of Vietnam Network in Vietnamese 1100 GMT 17 Jul 93)

Malaria Infection Rate Drops 30 Percent

In the first 6 months of the year, the number of malaria sufferers in the country was 345,460, down by 30 percent compared with the same period last year. The number of malignant cases dropped by 23 percent and the death rate dropped by 61 percent, according to the deputy minister of

public health in charge of the national antimalaria program. In the central highlands, one of the worst infested areas, the death rate was 76 percent lower than in the corresponding period in 1992. (Hanoi Voice of Vietnam Network in English 1000 GMT 24 Jul 93)

Dong Nai, Nam Ha Provinces Reduce Malaria Infection

Due to their active prevention programs, in the first six months, Dong Nai and Nam Ha Provinces report less people infected with malaria, compared to the same period last year. In Nam Ha, the number of infected cases decreased by 20 percent with no fatalities. In Dong Nai it decreased by 23 percent and the number of fatalities decreased 50 percent. Dong Nai is presently intensifying its malaria prevention campaign for the rainy season. (Hanoi Voice of Vietnam Network in Vietnamese 0500 GMT 18 Jul 93)

Regional Epidemiology Roundup for 23 Jul - 14 Aug

BK1608074193

[Editorial Report] The following is a compilation of summaries of foreign media reports on Southeast Asian and South Asian Epidemiology developments monitored by Bangkok Bureau from 23 July to 14 August 1993. Source-lines are given in parentheses after each item.

Indonesia

Diarrhea kills 10 in Yogyakarta

The head of the Yogyakarta regional health department said that 66,033 people in the province have been affected by diarrhea this year. Of this number, 19,495 patients were found in Sleman District; seven have died. In Bantul District, 14,404 were recorded to be affected by the disease; three people have died. In Gunungkidul District there were 13,360 patients. Kulonprogo District had 9,891 patients, and in Yogyakarta municipal town 8,898 were affected by the disease. (Jakarta SUARA PEMBARUAN in Indonesian 23 Jul 93)

Laos

Fifteen Children Die of Measles in Samsai District

In mid-July, an outbreak of measles erupted in Pakse and Tha Misai villages in Samsai District, Attopeu Province. As a result, out of a total of 96 people who were afflicted, 15 children under the age of 15 have died. (Vientiane Vitthayou Hengsat Radio Network in Lao 0000 GMT 14 Aug 93)

Thailand

Health Sector Combats Tuberculosis Virus

Thailand's campaign against tuberculosis was effective until AIDS began to spread in the country, according to the Bangkok Metropolitan Administration Health Center. About 30 percent of the total population of 56 million people in Thailand carry the tuberculosis virus, and 10 percent of the 17 million people infected with the virus actually suffer from the disease. A campaign to educate the

public will be held from August 16 to 22. (Bangkok BANGKOK POST in English 10 Aug 93)

Vietnam

Committee Institutes Programs To Stop Spread of AIDS

The National Committee for Control and Prevention of AIDS recently held a conference to review tasks in the first six months of 1993. Reports showed that in the first half of the year, AIDS has strongly spread in both the number of HIV-carriers and in the number of localities where these carriers were detected. For the next six months, three programs will be closely coordinated to control the spread of AIDS: preventive measures, education and information campaigns, and management of HIV-carriers. (Hanoi Television Network in Vietnamese 1200 GMT 8 Aug 93)

Malaria Situation Stabilizes in Quang Nam-Danang

The malaria situation in Quang Nam-Danang Province has stabilized; no major epidemics have been reported. In the province, 8,000 patients have been identified so far, including 250 serious and 11 fatal cases. In comparison with the same period last year, the number of malaria patients has fallen by 18 percent. Fatal cases have declined by 75 percent. (Hanoi Voice of Vietnam Network in Vietnamese 1100 GMT 7 Aug 93)

Quang Binh Antimalaria Activities Cited

Quang Binh Province mobile paramedical teams have performed tasks such as spraying insecticides, encouraging people to use mosquito nets, urging people to maintain a clean living environment, and distributing preventive medicines. The medical authority of Quang Binh will also seek assistance from other agencies and services to expand their antimalaria program for the second half of the year. (Hanoi Voice of Vietnam Network in Vietnamese 1100 GMT 8 Aug 93)

Rate of Malaria Infection in Son La Province Improves

The malaria infection rate in Quynh Nhai District of Son La Province has declined compared with previous years. The district malaria control mobile team, in conjunction with local medical personnel, has successfully halted the spread of malaria at a very early stage in the villages of Pha Kinh and Ka Nang. The medical personnel network, however, is insufficient to cope with the task as only 17 medical workers were assigned to care for 78 tribal villages. (Hanoi Voice of Vietnam Network in Vietnamese 1430 GMT 9 Aug 93)

Thanh Hoa Province Effectively Combatting Malaria

Since early this year, no new cases of malaria have been reported in Thanh Hoa Province. The number of people carrying malaria parasites and the number of those dying of malaria have all decreased, representing only one-third of last year's numbers. To reduce malaria mortality and to prevent the spread of malaria parasites, the central government and the province have invested nearly 1.7 billion dong in buying medicine, chemicals, and instruments to control malaria, as well as in conducting antimalaria

propaganda. (Hanoi Voice of Vietnam Network in Vietnamese 2300 GMT 11 Aug 93)

Overall Number of Malaria Patients Declining in Binh Dinh

The number of malaria patients in Binh Dinh Province has declined by 17.34 percent, and the number of serious cases by 45.45 percent in comparison with the same period last year. Blood tests also showed that the rate of parasites has been reduced by 63 percent. (Hanoi Voice of Vietnam Network in Vietnamese 2300 GMT 8 Aug 93)

Regional Epidemiology Roundup for 28 Jul - 8 Aug

BK0908062493

[Editorial Report] The following is a compilation of summaries of foreign media reports on Southeast Asian and South Asian Epidemiology developments monitored by Bangkok Bureau from 28 Jul to 8 Aug 1993. Sourcelines are given in parentheses after each item.

Australia

Differing Opinions on Seriousness of Malaria Outbreak

An increase in the number of malaria cases has been detected in the North Queensland city of Townsville. A report in the Australian Medical Journal noted that malaria could become endemic again due mainly to the number of overseas visitors. It said major complications of malaria including cerebral malaria, the most dangerous form of the disease, are being seen with increasing frequency. However, the director of the Northern Regional Health Authority denied suggestions of a serious risk of malaria in the North Queensland region. He said it is unlikely that the disease will become endemic in the Townsville region. (Melbourne Radio Australia in English 0500 GMT 2 and 3 Aug 93)

Laos

Malaria, Leprosy Spread in Sekong, Houa Phan

In Sekong Province in the first six months of this year, 137 out of 1,224 people were found to be afflicted with malaria; five people have died of the disease. Additionally, 51 out of 1,112 people from 22 villages in Lamam and Kalum Districts were found to have suffered from leprosy during the same period.

In Viengsai District, Houa Phan Province, from late May to late July, 128 out of 665 people from eight villages were afflicted with malaria. (Vientiane Vitthayou Hengsat Radio Network in Lao 1200 GMT 2 Aug 93)

Diarrhea, Dysentery Kill 26 in Khammouane

Public health officials have reported that in Boualapha District, Khammouane Province, the spread of diarrhea and dysentery is continuing. From June to 29 July, 874 people were afflicted with diarrhea and dysentery; 26 people have died. (Vientiane Vitthayou Hengsat Radio Network in Lao 0000 GMT 6 Aug 93)

Epidemic Claims 72 Lives in Khammouane, Sianghon-Hongsa

Since mid-May, 20 people have died of malaria while 34 others have died of dysentery in Nong Bok District, Khammouane Province following an outbreak of the diseases. The epidemic has continued in the areas of Ngong Kham, Na Champa, and Dong Kasin. Meanwhile, another outbreak of the diseases has struck the Samakkhisai area, Ngeun District, Sianghon-Hongsa Special Zone, resulting in the deaths of 18 people in just one week. (Vientiane Vitthayou Hengsat Radio Network in Lao 1200 GMT 7 Aug 93)

Forty Suffer From Leprosy in Phong Saly

In the first half of the year, forty people have been found to suffer from leprosy: 16 were from Gnot Ou District, 15 from Boun Neua District, seven from Khoua District, and two from Mai District. (Vientiane Vitthayou Hengsat Radio Network in Lao 0000 GMT 1 Aug 93)

Vietnam

Aids Statistics Countrywide

As of 23 July, 693 people have been found to be infected with HIV countrywide, of which 617 are Vietnamese and 76 are foreigners. Most of these cases were the result of drug addictions. However, HIV infection through prostitution has been increasing, especially in Ho Chi Minh City and Khanh Hoa Province where 414 and 68 people respectively have been identified as HIV-positive. (Hanoi Voice of Vietnam Network in Vietnamese 1100 GMT 28 Jul 93)

Malaria Control Program for Mountainous Areas

Provinces in the mountainous areas, namely Nghe An, Thanh Hoa, Lang Son, Quang Nam, and Dong Nai, need urgent help to prevent the spread of malaria. The International Red Cross and Red Crescent Organization have granted Vietnam more than one billion dong to purchase medicine for the northern provinces. Also, \$45,000 has been reserved by the organizations to help the southern provinces. (Hanoi Vietnam Television Network in Vietnamese 1200 GMT 28 Jul 93)

Australian Company Provides Medicine To Combat Malaria

The Ministry of Public Health recently received 476,000 antimalaria tablets as aid from an Australia company to the central Province of Nghe An. Last year, Nghe An Province had the highest rate of malaria incidence and morbidity in the country. (Hanoi VNA in English 0612 GMT 8 Aug 93)

Thanh Hoa Province Treating Goiter

Thanh Hoa Province has been allotted 900 million dong from the central government and has set aside 800 million dong from its own budget to treat and prevent goiter. Production of iodized salt for distribution to 800,000 people in 66 villages of the province has been completed. Despite these efforts, the percentage of infectious goiter in the province has remained high. In Ba Thuoc and La Chanh Districts, for instance, 40 to 75 percent of the

population have been affected by goiter. (Hanoi Voice of Vietnam Network in Vietnamese 1430 GMT 1 Aug 93)

Regional Epidemiology Roundup for 15 - 28 Aug

BK3008105193

[Editorial Report] The following is a compilation of summaries of foreign media reports on Southeast Asian and South Asian Epidemiology developments monitored by Bangkok Bureau from 15 to 28 August 1993. Sourcelines are given in parentheses after each item.

Laos

Malaria Epidemic in Champassak District

In Champassak Province from 6 to 14 August, an outbreak of malaria occurred in eight villages in Zone 4 in Champassak District, killing 19, mostly children under the age of 14. More than 60 patients remain in the district hospital. Because the epidemic has spread rapidly in many villages, the district Public Health Service has sent medical cadres to provide urgent treatment. (Vientiane Vitthayou Hengsat Radio Network in Lao 1200 GMT 18 Aug 93)

Malaria Prevention in Two Oudomsai Districts

According to the Public Health Service of Oudomsai Province, in early August medical units were sent to give malaria blood tests in 10 villages in Namo and Sai Districts. Of 838 people taking the tests, 173 were found to have malaria. (Vientiane Vitthayou Hengsat Radio Network in Lao 1200 GMT 27 Aug 93)

Fifty Die in Khammouane Province

The Public Health Service of Nongbok District, Khammouane Province, reported that from 20 July to 1 August, 50 people in the district died of measles, malaria, diarrhea, and dysentery. The areas hit by epidemics included Nong Phan, Khana Champa, and Dong Kathing Cantons. A total of 141 children were found to be carrying measles while 900 were suffering from diarrhea and dysentery. Of 392 patients taking blood tests, 61.77 percent were afflicted with malaria. (Vientiane Vitthayou Hengsat Radio Network in Lao 0000 GMT 27 Aug 93)

Diarrhea, Dysentery Epidemic Strikes Savannakhet

Since early August, diarrhea and dysentery have spread in Ban Khok Neua and Ban Khok Tai in Sibounheuang Canton, and Ban Dong Noi in Bang Dong Noi Canton, Outhomphon District, Savannakhet Province. More than 70 people are reported suffering; five have died. In the early rainy season, diarrhea and dysentery also broke out in Phin, Sepon, and Vilabouli Districts in Savannakhet Province resulting in many deaths. (Vientiane Vitthayou Hengsat Radio Network in Lao 0000 GMT 15 Aug 93)

1,782 Animals Die in Attopeu Province

A total of 1,782 livestock animals died of various diseases in Sanamsai District, Attopeu Province during the first six months of the year. The dead animals include 129 buffalos, 31 cows, 146 pigs, and 1,476 chickens. To tackle the problem, teams of veterinarians have been dispatched to

give vaccinations to animals in the area. (Vientiane Vitthayou Hengsat Radio Network in Lao 0000 GMT 28 Aug 93)

Singapore

Another 39 HIV Cases Detected

Thirty-nine new cases of Human Immunodeficiency Virus (HIV) infection were detected among Singaporeans in the first seven months of this year. Of the 39, two were women. The Health Ministry said that 197 Singaporeans have been infected with HIV since the first case was detected in 1985. Of these, 136 have not shown any symptoms of AIDS yet. One has caught an AIDS-related illness, 43 have died, and the remainder have full-blown AIDS. (Singapore THE STRAITS TIMES in English 24 Aug 93 p 2)

Thailand

Special Task Force To Study New Cholera Strain

A special task force has been set up to study a new strain of cholera which is spreading from India and Bangladesh, according to the Department of Communicable Disease Control. The new strain is called 0139 and its symptoms are similar to normal diarrhea. No cases of the new disease have been officially reported in Thailand, but doctors have reported a number of cases. The vaccine developed to combat the new strain has proven only 50 percent effective and will provide only short-term protection (Bangkok THE NATION in English 19 Aug 93)

Vietnam

Lam Dong Province Begins Antimalaria Program

This year Lam Dong Province has allotted 4 billion dong to an antimalaria program. So far, nearly 2 billion dong have been used to conduct surveys to determine the rate of malaria infection, as well as to administer medical treatment to malaria victims. Mobile antimalaria teams have also been established and sent to sensitive areas to spray insecticides to protect as many as 100,000 people. Malaria mortality in Lam Dong during first six months of 1993 dropped by 43 percent compared with the same period last year. (Hanoi Voice of Vietnam Network in Vietnamese 1430 GMT 19 Aug 93)

JAPAN

Two Students Contract Cholera After Indonesian Trip

*OW0709092393 Tokyo KYODO in English
0853 GMT 7 Sep 93*

[Text] Narita, Chiba Pref., Sept. 7 KYODO—Two female students who returned from Indonesia on Sunday [5 September] are infected with cholera, the Narita Airport Quarantine Office said Tuesday.

The students, both 21, from Hachioji and Kokubunji in Tokyo, contracted the El Tor strain of cholera while on a language study trip in Indonesia. Officials believe that juice the two drank during their stay is to blame.

The quarantine officials admitted them to a hospital in Tokyo after the two complained of diarrhea.

MONGOLIA

Two Incidents of Bubonic Plague Reported in Kobdosk Region

LD0509100693 Moscow ITAR-TASS in English
0936 GMT 5 Sep 93

[By ITAR-TASS correspondent Kim Boldokhonov]

[Text] Ulan-Bator September 5 TASS—Two incidents of Plague have been reported in the Kobdosk region in the west of Mongolia. A 36-year-old man and a 14-year-old boy, who had developed symptoms of plague, were taken to hospital. The authorities are taking measures to prevent the spread of the disease. Transport vehicles have been banned from the area where the two people fell ill.

This is the fourth consecutive incident of Plague registered this year.

THAILAND

Deputy Health Minister Denies Spread of New Cholera Strain

BK1808012393 Bangkok THE NATION in English
18 Aug 93 p A2

[Text] Deputy Public Health Minister Anek Thapsuwan yesterday denied that a new strain of cholera has spread to Thailand from India and Bangladesh.

The disease has not hit Thailand as not a single case had been reported to the Public Health Ministry so far, he said.

Health officials, however, are on the alert against the disease, he said.

The INTERNATIONAL HERALD TRIBUNE reported over the weekend that a new strain of cholera was sweeping across India and Bangladesh at an alarming rate and, quoting Thai doctors, said it had spread to Thailand.

The newspaper said the doctors stated in a letter to the leading British medical journal LANCET that the new strain had been found in patients in Bangkok.

ROK Health Ministry Issues Cholera Warning for Travelers to Bangkok

SK0608084193 Seoul YONHAP in English
0732 GMT 6 Aug 93

[Text] Seoul, Aug. 6 (YONHAP)—The Health and Social Affairs Ministry said Friday it had found cholera germs in a toilet on an airliner that arrived in Seoul from Bangkok via Singapore with 77 passengers last Monday.

Ministry officials said they were trying to find all 77 passengers to see whether any of them had contracted cholera.

The ministry issued a cholera warning for travelers to Bangkok since officials found cholera in another airliner on Sunday, the officials said.

They said, however, they could not name the airlines because disclosure might "harm" their image.

The ministry received reports of three cases of cholera and found cholera germs in toilets of two other airliners this year, all of them coming from Bangkok.

Nine out of 11 patients who contracted cholera last year were believed to have contracted the disease in Thailand, the officials said.

VIETNAM

Team of Australian Experts To Study Malaria Problem in SRV

BK2408070893 Melbourne Radio Australia in English
0500 GMT 24 Aug 93

[Text] Australia is considering spending more than \$6.7 million [Australian dollars] to combat the growing threat of malaria in Vietnam. A team of experts today left Australia to undertake a feasibility study for a possible 5-year project.

Australia's development cooperation minister, Gordon Bilney, says malaria affects more than 1 million people in Vietnam and causes about 5,000 deaths each year.

The proposed Australian project will increase the production of drugs, improve the treatment of patients, and step up measures to control mosquitoes.

Mr. Bilney says those people worst affected in Vietnam by the disease are the rural poor, often from ethnic minority groups.

BOSNIA-HERCEGOVINA

More Hepatitis, Enterocolitis Cases Registered in Sarajevo

AU0609163493 Sarajevo Radio Bosnia-Herzegovina Network in Serbo-Croatian 1300 GMT 6 Sep 93

[Text] An epidemic of infectious hepatitis continues to spread in Sarajevo. Twenty-nine new cases have been registered in the last 7 days. This increases the total number of infected people to 98. The situation is particularly serious in the area of (?Sok) Bunar, where the greatest number of cases have been registered. That is why it has been decided, at the Sarajevo city Executive Committee meeting, that further public notification is necessary. The citizens need to be informed about the ways in which one can fight this dangerous disease. This should at least somewhat alleviate the problem of poor hygiene and help prevent the epidemic from spreading.

Moreover, Fahrudin Kulenovic, head of the Epidemiology Institute, said at the city government meeting that during the past 7 days 351 new cases of enterocolitis have been registered in the Sarajevo area. Another very worrisome thing is the increase of tuberculosis cases, which according to experts might be the next infectious disease to turn into an epidemic.

Dr. Kulenovic compared the epidemiologic situation with the situation last year, and said that the number of deaths caused by infectious diseases has increased three and a half times.

BULGARIA

Civil Defense Called In as Anthrax Breaks Out in Khaskovo

AU2508143693 Sofia Khristo Botev Radio Network in Bulgarian 0800 GMT 25 Aug 93

[Text] The purchase of meat of unproven origin offered suspiciously cheaply can be a sure way to end up in hospital, our correspondent Vladimir Delchev reports from Khaskovo. Here are the facts of the case:

[Begin Delchev recording] Following the epidemic of foot-and-mouth disease that put veterinarian specialists on the alert, seven cases of anthrax have been reported in the village of Stransko in the Dimitrovgrad Municipality. The state veterinary and public health authorities reacted promptly on this occasion as well, and quickly established the source of the infection.

It turned out that those infected had eaten meatballs made from locally prepared mince. It emerged that the mince had been prepared from relatively cheap meat supplied by a Gypsy tradesman without the necessary public health quality certificates. The meat had evidently been obtained illegally from uncertified animals. This made it necessary to examine all the animals in the village. The infected animals were put down and buried deep in the ground, the area in which they had been kept was disinfected, and the

healthy animals vaccinated. The 700 kilograms of infected meat was sent to be incinerated.

However, it has turned out that it is more difficult to combat anthrax than to deal with foot-and-mouth disease. So far 24 cases of anthrax have been confirmed among the citizens. The patients are being treated in hospitals in Dimitrovgrad and Stara Zagora. The Civil Defense has been brought in to eliminate this danger to livestock and people, and is disinfecting all fields that are suspected of being infected. [end recording]

CZECH REPUBLIC

Spread of Rabies in Eastern Bohemia

93CH0781Z Prague ZEMEDELSKE NOVINY in Czech 3 Jul 93 p 4

[Article by Karel Brodsky: "They Are Fighting Against Rabies"]

[Text] While the Trutnov and Nachod veterinarians rate this year's situation with outbreaks of rabies as relatively good, there have been outbreaks recorded in three-quarters of the land register territories, and, in the Usti nad Orlici okres, there have been 15 hot spots registered and even 21 at Rychovsek in the eastern Bohemian region.

"After it was relatively quiet last year, we discovered rabies again in December," states MVDr. Josef Jansa, director of the Okres Veterinarian Administration in Rychnova nad Kneznou. "Since that time, it has been progressing from the regions of the Orlické Mountains—that is, from the Polish border down into the lowlands. In June, we recorded rabies in the towns of Zahore, Synkova, Cesky Mezirice, Ricky, and Hroska in the Orlické Mountains. The outbreak is also much more frequent. In 1991, for example, there were 79 foxes shot in the okres and 49 of them examined for rabies. Five of them were positive. Last year, the figures in the same order were 220, 51, and 18, and, up to 31 May of this year, there were already examinations of 68 of the 75 foxes shot, and 29 were positive.

The veterinarians of Usti nad Orlici together with the public health personnel on Monday issued warnings to all town and village offices in the okres. That was in reaction to the 15 rabies centers—for example, in Pastviny, Kunvald, Techonina, Lukavice, Cenkovice, and Lichkova. Since the beginning of the year, there have been 42 cases of rabies discovered, of which 38 were in foxes, but also cases in horses, deer, rabbits, and cats. Dr. Marta Pavlova, the okres public health doctor, says, "Rabies is a truly dangerous disease that can affect all warm-blooded animals and, of course, humans as well. Today, when thousands of people are certainly coming into our region, it is necessary to point out that, if there is any kind of injury from an unfamiliar animal that includes smearing the skin with saliva or handling a dead animal without gloves, it is necessary to go to the doctor as soon as possible and to get the animal to a veterinarian for examination. We will be imposing other, mainly veterinarian, measures throughout the community for all owners of household pets that can

come into contact with live wild animals." In the land registry sections of Cenkovice, Orlicy, Voltarice, Vyprachice, and Bystrec, at the current time they have proceeded with oral vaccination of the foxes. In practical terms, that is carried out by inserting vaccination doses in the shape of a flatiron sized 5 by 3.5 by 1.7 centimeters in bait. The inoculation material is placed in a plastic capsule within the bait material—for example, fish flour mixed with fat. For the fall, the veterinarians and public health personnel are planning a widespread vaccination of foxes not only in the Usti nad Orlici area, but also throughout the entire eastern Bohemian region.

Steep Rise in Venereal Disease Cases Noted

93CH0797Z Prague LIDOVE NOVINY in Czech
22 Jun 93 p 2

[Article by Martina Riebaurova: "The Number of Venereal Disease Cases Has Tripled"]

[Text] Over the past 3 years, the number of cases of venereal disease has tripled, certainly also because of the boom in tourism and prostitution. The increase was greatest in Prague and in the north of Bohemia (there, in view of the original low number of cases, an increase of 5,700 percent is being listed). The largest number of venereal disease cases involves the age group between 15 and 24; in that regard, we are number-one in Europe. According to Dr. Foltinova of the Ministry of Public Health, there are actually many more cases: Physicians, mostly private ones, are not reporting them, however. It is still more difficult to compel someone to see a physician, let alone expect that he should refrain from having sexual

intercourse for a period of 5 years after syphilis. Hygienists may order a medical examination for "at-risk" individuals where there is a danger of epidemic, but that is virtually all they can do. A year ago, that attempt was made by Teplice; today, Cheb is preparing to do the same. "At that time, the girls willingly mounted the examination table and let themselves be examined as well as counseled. One quarter (27) had syphilis. We cured one; all of the others disappeared. It cost tremendous amounts of money, and the results were pitiful," Dr. Kotesovec, the Teplice hygienist, told LIDOVE NOVINY. According to Dr. Foltinova, a major educational campaign, aimed at "buyers of sex," would be helpful in public buildings, in addition to regulating prostitution. In other words, prevention instead of restriction, much as is the case with AIDS, which has much in common with syphilis. That is so because syphilis altered the course of European cultural history at the beginning of the 16th Century and because venereal diseases also facilitate the transmission of the HIV virus fourfold to eightfold.

POLAND

First Cases of Diphtheria in Bialystok Province

LD0709084393 Warsaw Radio Warszawa Network
in Polish 0800 GMT 7 Sep 93

[Text] The first two cases of angina with symptoms of diphtheria have been recorded in surgeries of Bialystok province. One of the persons suspected of having diphtheria used to visit a market in Bialystok where most traders come from the former Soviet Union and are considered a high risk group.

REGIONAL AFFAIRS**Southern Cone Health Report for 16 - 22 Jul**

PY2207214693

[Editorial Report] The following is a compilation of reports on epidemics and diseases monitored by Paraguay Bureau from 16 to 22 July.

Bolivia

According to the WHO, 2,500 people may be infected with AIDS in Santa Cruz Department, where three new AIDS cases were detected in the last three weeks and 18 cases in the past 18 months. A total of 64 AIDS cases have been registered since 1986, many of whom have died. (La Paz HOY in Spanish 11 Jul 93 Section 2 p 4)

Brazil

Macular fever, a disease caused by horse-parasite ticks, caused three deaths in the past few days in Caipe, Minas Gerais State. Another case has been detected in a patient admitted to a hospital. Military police and the civil defense organization are helping to spray the city in order to fight the disease. (Brasilia Voz do Brasil in Portuguese 2200 GMT 21 Jul 93)

Regional Health Report for 17 - 23 Jul

PA2407033793

[Editorial Report] The following is a compilation of regional health reports monitored by Panama Bureau from 17 to 23 July. Source follows in parentheses after each item.

Colombia

Health authorities in Arauca have ordered a mass fumigation to control an outbreak of hemorrhagic dengue detected at the municipal jail. Thus far, 30 cases have been registered, including three hospitalized patients and one death. (Santa Fe de Bogota Inravision Television Cadena 1 in Spanish 1730 GMT 20 Jul 93)

At least 12 patients with kidney disease were reportedly infected with AIDS in the city of Bucaramanga, capital of Santander Department, apparently due to the inadequate use of instruments in dialysis treatments. (Hamburg DPA in Spanish 2237 GMT 22 Jul 93)

Costa Rica

Health authorities have reported two cases of cholera in Limon. Two Nicaraguan citizens who recently arrived in Costa Rica were hospitalized, raising to 20 the number of cases confirmed in Costa Rica since January 1992. (San Jose LA NACION in Spanish 14 Jul 93 p 12A)

Costa Rica has signed health agreements with Nicaragua and Panama to prevent the spread of cholera, dengue, and malaria. According to statistics, a total of 2,572 cases of malaria have been registered from January to June 1993, compared to 3,094 during the same period in 1992. (San Jose LA REPUBLICA in Spanish 16 Jul 93 p 5A)

El Salvador

Salvadoran health authorities detected the first case of hemorrhagic dengue in the past four years in the western part of the country, and announced a national plan to prevent a possible epidemic. (Mexico City NOTIMEX in Spanish 2101 GMT 22 Jul 93)

Guatemala

A malaria epidemic has affected 140 children and threatens 2,400 Guatemalan refugees repatriated from Mexico in January. The former refugees have settled in the department of El Quiche. (Madrid EFE in Spanish 1734 GMT 21 Jul 93)

Honduras

The Health Ministry has reported nine new cases of cholera in various parts of the country, raising the total number of cases to 718, including 481 men, and 237 women. The new cases were detected in the departments of Valle (2), Choluteca (2), Francisco Morazan (1), and Cortes (4). There have been 44 deaths from cholera since the disease first appeared in the country in October 1991. A total of 62 cases were reported last week, for a total of 294 in 1993. (Mexico City NOTIMEX in Spanish 0012 GMT 21 Jul 93)

Mexico

The Health Secretariat reported on 20 July that almost 4,000 cases of cholera, including 74 deaths, have been registered in Mexico during the first six months of 1993. Of the total number of cases—3,868—736 were detected in Puebla, 459 in Mexico State, 465 in Mexico City. (Madrid EFE in Spanish 2139 GMT 20 Jul 93)

Panama

Health authorities reported the death of an AIDS patient, the fifth this year, which has increased the total number of deaths caused by AIDS to 48. (Panama City EL SIGLO in Spanish 17 Jul 93 p 59)

Southern Cone Health Report for 23 - 29 Jul

PY2907212493

[Editorial Report] The following is a compilation of reports on epidemics and diseases monitored by Paraguay Bureau from 23 to 29 July.

Brazil

The Health Ministry has reported a surge of cholera cases over the last few weeks in the northeastern region, where 1,638 cases were reported last week. So far this year 29,436 cholera cases have been reported, 315 of which were fatal. The states hardest hit by the disease are Bahia and Ceara.

Researchers from the Manaus Institute of Tropical Diseases are concerned about the increase in the number of malaria cases in Amazonas State. Nine people have died of malaria in Manaus this year. According to the institute, 1,200 cases of malaria were registered in Manaus in June, and it is expected that the number of cases in July will increase by 50 percent. (Brasilia Voz do Brasil Network in Portuguese 2200 GMT 23 Jul 93)

The Health Ministry has reported that since 1980 and up until 3 July 1993, health officials have registered 39,500 AIDS cases in the country. The report adds that of this figure 16,4483 were fatal, which indicates that more than 40 percent of the Brazilians infected with AIDS have already died. According to the report 33,885 of the AIDS cases had been contracted by men, and 5,615 by women. Sexual relations were responsible for 23,703 AIDS cases, while 10,873 people had been infected through the use of drugs or contaminated blood. Sao Paulo has the largest number of AIDS cases with 23,299 people infected. (Brasilia Radio Nacional da Amazonia Network in Portuguese 1000 GMT 27 Jul 93)

Chile

Antofagasta's health service announced officially the death of a man and a woman as a consequence of AIDS infections. The total number of deaths caused by AIDS in the region now stands at 16. At present three individuals are sick with the disease, and 25 individuals have the virus but present no symptoms. The total number of registered cases in the Second Region thus stands at 44, including those who are sick and those who have already died. (Santiago Radio Cooperativa in Spanish 2300 GMT 28 Jul 93)

The Health Ministry has confirmed the deaths of two young students in Santiago of meningitis meningococcal type B. The Health Ministry admits a slight increase in the number of cases this year as compared to last year. Raquel Guzman and Lyz Buitazon, 14 and 15 years of age respectively, were students at the Metropolitan School. The ministry added that both students died while on winter vacation, which does not rule out the possibility that they could have contracted the disease before that period, as the victims were classmates. (Santiago Radio Cooperativa Network in Spanish 1100 GMT 27 Jul 93)

Regional Health Report for 24 Jul - 6 Aug

PA0708125293

[Editorial Report] The following is a compilation of regional health reports monitored by Panama Bureau from 24 July to 6 August. Source follows in parentheses after each item.

Colombia

Recent figures disclosed by the Colombian health authorities reveal that at least 2,855 HIV positive cases and 3,304 confirmed AIDS cases had been recorded in Colombia up until April 1993. The first AIDS case was recorded nearly 10 years ago in Cartagena. (Santa Fe de Bogota Inravision Television Cadena 1 in Spanish 0000 GMT 24 Jul 93)

Bucaramanga health authorities have decided to restrict dialysis service at the Gonzalez Valencia Hospital when it was detected that seven persons had been infected with the AIDS virus. According to Deputy Health Minister Wolfgang Munar, dialysis services could not be suspended but use by new patients can be restricted until such time as they have been tested for the AIDS virus. (Santa Fe de Bogota Inravision Television Cadena 1 in Spanish 1730 GMT 27 Jul 93)

Three persons died recently in Arauca Department as a result of hemorrhagic dengue. The first death was that of an adult which occurred in the municipality of Tama. The other two deaths recorded were of two children who died in Arauca. (Santa Fe de Bogota Inravision Television Cadena 1 in Spanish 1800 GMT 31 July 93)

El Salvador

The El Salvador Health Ministry disclosed that a second case of hemorrhagic dengue had been recorded in the country in less than a week. The latest case was recorded in the community of Mejicanos, located in the northern part of the country. According to national health officials, this type of infection had not been recorded in El Salvador since 1984. (Mexico City NOTIMEX in Spanish 2017 GMT 27 Jul 93)

Deputy Health Minister Gustavo Argueta disclosed that rabies continues to spread in El Salvador and has already caused 13 deaths during the current year. According to official statistics, rabies caused 26 deaths in 1988; one in 1989; three in 1990; seven in 1991; 19 in 1992; and 13 so far in 1993. According to the deputy health minister, the main problem in preventing the spread of rabies lies in that most dog owners do not vaccinate their pets. (Mexico City NOTIMEX in Spanish 1701 GMT 5 aug 93)

According to information revealed by Deputy Health Minister Gustavo Argueta, AIDS cases in El Salvador have increased significantly. At least 1,047 AIDS cases have been detected so far with 91 percent recorded in urban areas and 9 percent recorded in rural areas. In statements to the media, the health official indicated that most urban cases had been detected in San Salvador, followed by Santa Ana, and San Miguel. AIDS was first recorded in 1984 in a Salvadoran citizen returning from the United States. Since then, 400 persons have died, and at least 30,000 have been infected. (Mexico City NOTIMEX in Spanish 1704 GMT 5 Aug 93)

Honduras

The Honduran Public Health Ministry announced on 5 August that cholera cases recorded during the seven months of the year had surpassed all the number of cases recorded during 1992. According to official figures, 417 cases have been recorded so far this year, while 423 cases were recorded in 1992. Cholera Campaign Coordinator Alirio Cruz indicated that at least 45 persons have died from the epidemic. (Mexico City NOTIMEX in Spanish 1934 GMT 5 Aug 93)

Mexico

A Health Secretariat spokesman disclosed on 31 July that at least 17 persons died and 413 cholera cases were recorded in Mexico in the past seven days. According to the health spokesman, 115 cases had been recorded in Puebla, and 60 cases in the State of Mexico. (Madrid EFE in Spanish 2054 GMT 31 July 93)

Nicaragua

The Nicaraguan Health Ministry confirmed on 27 July that the number of cholera related deaths had increased to 122, and that at least 4,651 persons had been infected since it was first recorded in November 1991. A Health Ministry spokesman disclosed that 79 persons had died and 1,601 had been infected during 1993 as opposed to 1992 when only 43 deaths were recorded. (Panama City ACAN in Spanish 27 Jul 93)

Panama

Chiriquí Epidemiology Director Dr. Pablo Acosta reported that meningitis cases had been detected in the province during a routine health inspection to the community of Manaca Civil. According to Dr. Acosta, the disease was discovered in a home where three children and two adults had been infected. (Panama City LA PRENSA in Spanish 28 Jul 93 p 7a)

The latest report disclosed by the Department of Control and Vigilance and Control of Sexually Communicable Diseases and AIDS indicates that from 1984 to June 1993, at least 528 AIDS cases had been recorded in Panama. The report also indicates that 122 new cases have been recorded during the current year. The document also explained that 11 AIDS cases have been detected among infant and youngsters in the 0-4 year old range bracket; eight cases in the 5-14 range bracket; 10 cases in the 15-19 range bracket. (Panama City EL PANAMA AMERICA in Spanish 30 Jul 93 p 3a)

Dr. Francisco Moreno Pascal, president of the Panamanian Anti-Tuberculosis Organization (OPAT) indicated that at least 2,000 new cases are recorded each year in Panama. According to Dr. Pascal, tuberculosis cases have been recorded frequently since 1990. (Panama City LA ESTRELLA DE PANAMA in Spanish 3 Aug 93 p 16b)

Peru

Medical authorities have called attention to the recent spread of rabies throughout Lima. A 10-year-old girl died shortly after having been bitten by a rabid dog. In addition, at least 10 more youngsters have been taken to local Lima medical centers after having been bitten by stray dogs. (Paris AFP in Spanish 2013 GMT 5 Aug 93)

Venezuela

It has been officially reported that at least 4,000 dengue cases have been recorded so far in Venezuela during 1993. In addition, eight persons have also died as a result of dengue related complications. According to Health Ministry Epidemiology Director Luis Echezuria, most cases have been recorded in the States of Tachira with 1,345 cases; Barina with 966 cases; and Aragua with 565 cases. However, dengue cases have also been reported in other Venezuelan states. (Paris AFP in Spanish 2352 GMT 5 Aug 93)

Health Ministry sources disclosed the measles epidemic has caused 20 deaths and nearly 11,936 cases throughout

the country. Dr. Francisco Araoz, head of the Communicable Diseases Department announced that the Health Ministry is about to launch a campaign to vaccinate approximately 8 million youngsters throughout the country. (Havana PRENSA LATINA in Spanish 2111 GMT 5 Aug 93)

Southern Cone Health Report for 30 Jul - 5 Aug
PY0608014093

[Editorial Report] The following is a compilation of reports on epidemics and diseases monitored by Paraguay Bureau from 30 July to 5 August.

Brazil

The Acre State Health Secretariat reported 70 cholera cases were registered in one week. At least 10 Indians may have died near Santa Rosa, on the banks of the Purus River on the border between Acre and Peru. Last week, the disease killed five Kampas Indians from Amonea village near the city of Thaumaturgo. (Rio de Janeiro O GLOBO in Portuguese 31 Jul 93 p 9)

At least one person dies of malaria every day in Peixoto de Azevedo, Mato Grosso State. The Peixoto de Azevedo region, which has nearly 75,000 inhabitants, already has registered 14,901 cases since January. The disease is endemic in 40 percent of the population, and the annual epidemic that affects 80 percent of the people occurs during the rainy season, from October to May. (Rio de Janeiro O GLOBO in Portuguese 1 Aug 93 p 8)

Chile

A new cholera case was confirmed in Tocopilla last week, bringing the country's total to 29. (Santiago LA TERCERA DE LA HORA in Spanish 22 Jul 93 p 16)

Uruguay

The director of the National AIDS Prevention Program reported that 1,200 AIDS carriers, 400 AIDS cases, and 200 fatalities have been registered in Uruguay since 1983. A test of 12,000 people in Montevideo, Artigas, and Salto Departments between 1991 and 1992 showed that one out of every 1,000 people is infected with the virus. It is estimated that 3,000 people of Uruguay's total population are infected with the disease. (Montevideo EL PAIS in Spanish 29 Jul 93 p 16)

Southern Cone Health Report for 6 - 12 Aug
PY1208220993

[Editorial Report] The following is a compilation of reports on epidemics and diseases monitored by Paraguay Bureau from 6 to 12 August.

Brazil

The Health Ministry released the latest figures on the cholera epidemic, which mainly is affecting the northeast. So far this year, 31,747 cases of cholera have been reported

throughout the country, 351 of them fatal. In the northeast, 30,558 cases have been reported so far, 297 fatal. (Brasilia Radio Nacional da Amazonia Network in Portuguese 2200 GMT 6 Aug 93)

Chile

According to the Health Ministry, through 5 August a total of 270 cases of meningitis, 34 fatal, have been registered throughout Chile. Of the 270 cases, 154 were registered in metropolitan Santiago. (Santiago Radio Cooperativa in Spanish 2300 GMT 5 Aug 93)

Official sources reported that meningitis meningococcus cases in Chile through 11 August rose to 295 cases registered so far this year, a 30 percent increase compared with the same period last year. (Madrid EFE in Spanish 1947 GMT 11 Aug 93)

Paraguay

The Uruguayan and Paraguayan Governments signed on 11 August a cooperation agreement on health promotion, protection and rehabilitation, epidemiology control of diseases declared of common interest, health technology, and the training of personnel. (Asuncion ABC COLOR in Spanish 11 Aug 93 p 21)

Uruguay

Uruguayan health authorities confirmed a meningitis outbreak on the border with Brazil. Official sources reported that 12 cases have been registered so far—eight in Rivera, 500 km from Montevideo, and four in the Brazilian border city of Santa Ana do Libramento, Rio Grande do Sul State. (Madrid EFE in Spanish 1344 GMT 7 Aug 93)

Regional Health Report for 7 - 13 Aug

PA1408130293

[Editorial Report] The following is a compilation of regional health reports monitored by Panama Bureau from 7 to 13 August. Source follows in parentheses after each item.

Costa Rica

The health minister reported today that 500 people have been registered HIV positive since 1983, with 460 male cases and 30 female cases. No cases of infection reported due to blood transfusions during the first six months of this year. (Mexico City NOTIMEX in Spanish 1823 GMT 12 Aug 93)

The Health Ministry today warned the directors of metropolitan hospitals about the presence of the cholera bacteria in Rio Virilla waters that run through the capital. (Mexico City NOTIMEX in Spanish 1637 GMT 13 Aug 93)

EI Salvador

Health authorities have reported 170 new cholera cases in the past few days. Despite Health Ministry prevention campaigns, cholera cases are on the rise. (San Salvador Radio Venceremos Network in Spanish 1800 GMT 10 Aug 93)

Guatemala

Over 25 people have died due to the last cholera outbreak, according to health center reports, causing concern among health authorities. (Guatemala City PRENSA LIBRE in Spanish 8 Aug 93 p 43)

Honduras

The health minister officially reported 49 new cases of AIDS in July, totaling 2,915 people infected, of which 727 have died. Medical sources have estimated that approximately 50,000 people are HIV positive. (Mexico City NOTIMEX in Spanish 2029 GMT 7 Aug 93)

Mexico

In the past 7 days, 393 new cases of cholera and four fatalities have been registered in Mexico, a decrease compared to last week's statistics of 413 cases and 17 deaths. (Madrid EFE in Spanish 1823 GMT 7 Aug 93)

Panama

Metropolitan health authorities have reported that 12 prostitutes were found to be infected with HIV. According to statistics, there are 500 people infected with AIDS of which 80 percent are men. (Panama City EL SIGLO in Spanish 8 Aug 93 p 14a)

Health authorities have reported an alarming increase of mosquito transmissions of cholera-dengue in Santiago province. (Panama City EL PANAMA AMERICANO in Spanish 11 Aug 93 p 15a)

Health Ministry sources have reported four malaria cases from 4 to 10 July, and so far in 1993, 150 cases have been reported, mostly in Darien Province. (Panama City CRITICA LIBRE in Spanish 9 Aug 93 p 4)

Venezuela

Barinas State has been declared in a health-related state of emergency given the new dengue outbreak due to the rainy season. Over 3,000 cases have been reported. (Caracas Venezolana de Television Network in Spanish 2350 GMT 4 Aug 93)

Southern Cone Health Report for 13 - 19 Aug

PY1908223493

[Editorial Report] The following is a compilation of reports on epidemics and diseases monitored by Paraguay Bureau from 13 to 19 August.

Brazil

The latest WHO report says Brazil, which registered 36,481 AIDS cases through April, has become the country with the third-highest number of cases after the United States with 289,320 cases and Tanzania with 38,719 cases. (Sao Paulo O ESTADO DE SAO PAULO in Portuguese 17 Aug 93 p 11)

Chile

Health authorities reported seven new cases of meningitis over the weekend in Santiago. The Health Ministry said 317 cases have been reported since the outbreak of the

epidemic in Santiago, 39 of which have been fatal. (Santiago Television Nacional de Chile Imagen Internacional in Spanish 0100 GMT 17 Aug 93)

Regional Health Report for 14 Aug - 2 Sep *P40309035293*

[Editorial Report] The following is a compilation of regional health reports monitored by Panama Bureau from 14 August to 2 September. Source follows in parentheses after each item.

Colombia

The recent infection of 60 persons with AIDS through blood transfusions has unveiled a grave health situation in Colombia. The Health Ministry has officially reported that there are 6,159 cases of AIDS carriers in the country. Of these, 3,304 have the disease. (Madrid EFE in Spanish 0537 GMT 24 Aug 93)

Costa Rica

The Health Ministry has reported that measles is under control in the country, with only 21 cases having been reported in August. (San Jose Radio Reloj in Spanish 1730 GMT 18 Aug 93)

Honduras

Health Ministry authorities reported on 20 August that 35 new cases of cholera appeared in the country over the weekend bringing the total number of Hondurans who have acquired this disease to 940. (San Pedro Sula TIEMPO in Spanish 21 Aug 93 p 25)

Official health sources reported on 25 August that four out of every 100 pregnant women are infected with AIDS in Honduras. According to official reports, 6 percent of the AIDS cases in Honduras are 14 and 15 year old girls who maintain an active sexual life. (Panama City ACAN in Spanish 1557 GMT 25 Aug 93)

The high rate of tuberculosis in Honduras is linked to HIV advance in this Central American country according to official sources. Of the last 84 persons who died of TB, 57 had AIDS. (Panama City ACAN in Spanish 1931 GMT 27 Aug 93)

Mexico

At least 410 cases of cholera and eight deaths were registered in Mexico during the past week, the Health Department has reported. The new cholera outbreak is due to the rainy season. So far this year, at least 6,831 persons have been infected with cholera in Mexico, of which 108 have died. (Madrid EFE in Spanish 1749 GMT 21 Aug 93)

Nicaragua

The Health Ministry reported that the number of persons with HIV rose to 114 this week from 25 at the beginning of August. (Mexico City NOTIMEX in Spanish 1636 GMT 18 Aug 93)

The Health Ministry reported today that the cholera epidemic has caused 149 deaths of the 5,687 infected, since 1991. According to the authorities, Nicaragua has the

third highest rate of cholera in Central America after Guatemala and El Salvador. (Panama City ACAN 1653 GMT 31 Aug 93)

Juigalpa health authorities have reported 14 new cases of cholera at the San Antonio sugar mill. (Managua Radio Sandino in Spanish 1830 GMT 19 Aug 93)

Panama

The Panamanian Health Ministry has reported that there have been 50 malaria cases in the country from 15 to 21 August. According to the report, 47 of the cases are from Bocas del Toro Province. (Panama City LA PRENSA in Spanish 30 Aug 93 p 11a)

The Health Ministry has reported that up to 31 July, 320 persons have died of AIDS in the country. The total number of cases has risen to 535, of which 254 are males. (Panama City EL SIGLO in Spanish 15 Aug 93 p 46)

Peru

At least 18 persons have died of cholera in Puerto Esperanza, Purus Province, a local health sector spokesman reported on 29 August. (Paris AFP in Spanish 1556 GMT 29 Aug 93)

Venezuela

Deputy Health Minister Pablo Salcedo has reported that 5,444 new cases of dengue have been reported in the country and that so far eight persons have died from this disease. (Caracas EL NACIONAL in Spanish 26 Aug 93 p D-6)

Southern Cone Health Report for 27 Aug - 2 Sep *PY0209223593*

[Editorial Report] The following is a compilation of reports on epidemics and diseases monitored by Paraguay Bureau from 27 August to 2 September.

Argentina

The latest medical statistics show that more than 130,000 people are infected with AIDS in Argentina, most of them in Buenos Aires Province, Mar del Plata, Greater La Plata, and Rosario. (Buenos Aires NOTICIAS ARGENTINAS in Spanish 1311 GMT 29 Aug 93)

BRAZIL

Macular Fever Cases Reported in Minas Gerais

Three Deaths Confirmed

93WE0514A Belo Horizonte ESTADO DE MINAS (City section) in Portuguese 21 Jul 93 p 1

[Article: "Macular Fever Claims New Victim in Caete"]

[Text] The Municipal Secretariat of Health in Caete yesterday confirmed the existence of another case of macular fever in that municipality. The male patient—E.S., 36—is under observation at the hospital in that city. The disease has killed three people in Caete over the past 45 days, forcing the municipal government to decree a state of

emergency in the municipality and to suspend the traditional "Horse Festival" that had been scheduled for the first week in August.

At a meeting held at the Caete Secretariat of Health yesterday and attended by representatives of the Military Police, the Minas Gerais Institute of Agriculture, and the Zoonosis Coordinating Office of the State Secretariat of Health, a protocol was prepared for actions to be taken to combat macular fever in the municipality.

Instructions

The municipal secretary of health, Anderson Martins Franco, explained that the first step would be to instruct the population, and especially residents of the Pedra Branca neighborhood, where the three victims of the disease lived, to look for ticks on their bodies at least twice a day. The physician explained that the tick does not inject rickettsia as soon as it comes in contact with the individual's skin. Injection does not occur until four or five hours later.

The health authorities will attempt to interrupt the life cycle of the ticks, which are born from eggs, turn into larvae and nymphs, and finally become adult insects. In order to grow, the nymphs need to suck the blood of animals, and they prefer horses. By the time the nymphs fall back to the ground they are adults, and each one is capable of laying from 6,000 to 8,000 eggs. If the tick laying those eggs is infected with rickettsia, all its eggs will also be infected. The important thing, then, is to make it difficult for the nymphs to reach animals such as horses, dogs, and rodents.

Rats

The fight against rats will be carried out in places where they are usually found: in garbage, brush, and dirt. Not until later will the municipality concern itself with cleaning up the area. If the order were reversed, the rodents would migrate to other parts of the town before they could be dealt with.

Animals in Pedra Branca will be sprayed four times, with a 10-day interval between each spraying. When that period is over, the mayor of Caete will issue a decree banning the raising of large animals (horses and cattle) in the town's urban area.

Most Cases in Rural Area

The number of macular fever cases reported to the Zoonosis Coordinating Office of the State Secretariat of Health is too low. The person acknowledging that fact is Eduardo Pessanha, superintendent of the Epidemiological Control Section, who emphasizes that the disease is usually confused with other infections. "Reports are sporadic," he says. Another reason is the fact that a great many of the cases occur in rural areas, making diagnosis and treatment difficult. Macular fever is an infectious process causing septicemia, which can lead to death within a few days. If medicated, the patient recovers with no aftereffects.

The agent causing macular fever is rickettsia, a microorganism halfway between a virus and a bacterium that is

injected into human beings by the bite of the tick known as *Ambrioma tagenense* [as published]. Eduardo Pessanha explains that there is not and never has been an "epidemic" of the disease. "That is not how macular fever behaves," he says. The most effective means of prevention is control of the vector (the tick) and early diagnosis, which can prevent the infected individual from dying.

It is difficult to distinguish macular fever from other diseases, especially meningitis, the symptoms of which are similar. The differences are minimal and must be observed beginning with the appearance of the first symptoms: high fever (39 or 40 degrees Celsius), headaches, vomiting, and severe prostration. The first characteristic difference appears during the prodromal period (when the first signs of the disease appear), which lasts an average of 24 hours in the case of meningitis and 48 hours in the case of macular fever. The second difference is the deterioration in the patient's general condition, which is also slower in the case of macular fever. The patient's epidemiological background also counts in making the distinction. Patients who live in areas favorable to contact with the tick or animals must be considered suspect.

Samples of Ticks Gathered

93WE0514B Belo Horizonte ESTADO DE MINAS
in Portuguese 22 Jul 93 p 23

[Article: "Health Secretariat Collects Samples of Ticks in Caete"]

[Text] Experts from the Ezequiel Dias Foundation (Funed) and the Epidemiological Control Section of the State Secretariat of Health will visit Caete today to collect samples of ticks in the Pedra Branca neighborhood for analysis by the Oswaldo Cruz Foundation in Rio de Janeiro. Yesterday the municipal government began spraying areas where foci of ticks are usually found. Funed has conducted 194 tests this year alone to detect macular fever in Minas Gerais, and the results were positive in 26 of those cases. That number is too low, however, since most cases are not reported.

So says physician and pharmacist Marcio Moreira Galvao, director of Funed's Otavio Magalhaes Institute. His master's thesis at the Oswaldo Cruz Foundation's National School of Public Health was on macular fever. Galvao has been monitoring outbreaks of the disease in Minas Gerais since 1982, when 16 people were infected in Grao Mogol. Eight of those patients died before their illness was diagnosed. He says that 12 residents of Ouro Verde de Minas in the Mucuri Valley fell ill in 1984 and died soon after as a result of macular fever. In that same year, the disease struck in Bertopolis, also in the Mucuri Valley, where it killed six of the 19 individuals infected.

Another outbreak, described in detail by Dr. Aluisio Benvindo, occurred in Acucena in the Rio Doce Valley in 1990. In that town, eight people fell ill and six died as a result of the fever. The latest epidemic occurred in Caratinga last year, when 15 deaths were recorded as a result of the disease, which is transmitted by ticks of the species *Amblyonyx cajenense* [as published].

Galvao reports on the occurrence of those outbreaks, which were linked to problems of deforestation and environmental changes. In Grao Mogol, for example, the Rio Doce Valley Company had cleared the forest and planted eucalyptus in an extensive area around the town.

GUATEMALA

Cholera Epidemic Continues Unabated
93WE0518A Guatemala City SIGLO VEINTIUNO
in Spanish 16 Jul 93 p 16

[Article by Carlos Canteo]

[Text] The first 2 weeks of July showed an increase in the number of patients infected with cholera. The capital's two hospitals, the Roosevelt and St. John of God, reported the admission of an average of 40 patients, despite the measures adopted by the Health Ministry authorities.

The projections made by both the Health Ministry and the directors of the capital's two national hospitals indicated that an upsurge in cholera was expected in mid-year, specifically during the first half of June, but that it would later show a downward curve.

According to the projections, it was expected that during the week of 21-25 June there would be a decline in the rate of persons stricken. Nevertheless, this did not occur; on the contrary, from the end of that same month until the first 2 weeks of July, there was an upsurge in the disease.

At the Roosevelt Hospital, it was reported that 258 cases were treated during the first two weeks of July, coming mainly from San Juan Sacatepequez, Zone 11, Zone 7, and Mixco. The deaths of 10 patients also were reported.

Meanwhile, at St. John of God Hospital, the number of admissions during the same period was 295, making a total of 936 cases treated since 10 June. The deaths of four children were reported at this center. Moreover, as an additional note, the admission of a large number of patients from Zone 18 was cited.

The operations director at the Roosevelt Hospital, Stanley Quiros, remarked that the projections did not call for an upsurge in early July. However, he indicated that the fact that the rainy season has caused contamination of water sources should be taken into account.

As for the cases of deaths reported, Quiros claimed that this was due to the fact that the patients had arrived in critical condition, and did not respond to the rehydration treatment. The problem is that much time is wasted moving the patient from his place of residence to a hospital center.

The cases of fatalities were due to the patients' arriving in critical condition; hence, when the rehydration treatment was given to them, they failed to respond.

Furthermore, the General Hospital director, Israel Lemus, declared that it was important for the Health Ministry to promote educational campaigns in the country. He said that they should begin 4 months before the critical contagion periods, such as Holy Week, Christmas, and winter.

The cholera bacteria exist throughout the country, appearing primarily in the poverty-stricken belts surrounding the capital. Those localities lack even the minimal conditions for preventing contagion, mainly because the water sources become contaminated when winter arrives.

Moreover, the chief of the Cholera Treatment Unit, Axel Oliva, explained that there have been reports of rivers being contaminated with cholera bacteria. This causes widespread contagion, because that same water is used to irrigate the green vegetable crops.

The contamination will become intensified with the arrival of winter. Hence, it is expected that more cases of infected persons will appear between now and October. This entails taking greater precautions to avoid tragic consequences.

It is anticipated that the disease will remain active for another 2 weeks; then, a decline should appear in the number of patients entering hospital centers. This is a result of the educational campaigns that have been conducted.

Since July, when another outbreak of the disease was reported, 963 diarrhea cases have been admitted to St. John of God Hospital. Of that number, approximately 50 percent have left in good condition, with an average admission of 40 patients per day.

In addition, the deputy director of health services, Victor Manuel Medina, observed that, during the past few days, an increase has been reported in patient admissions to the Roosevelt and St. John of God Hospitals. However, this has also occurred in the 36 national hospitals all over the country, where action has been taken to rehabilitate the patients.

The work has been done in conjunction with San Carlos University, the Military Health establishment, Social Security, and the Health Ministry, to offer protection from a preventive and remedial standpoint.

The ministry is not to blame for the fact that the communities lack conditions for preventing contagion, such as drainage networks, water supply systems, or sources of employment, that would enable them to have housing with the proper sanitary facilities. Therefore, the ministry is only dealing with the consequences of the system under which we are living.

The only means of combating cholera is for the population to understand what cholera is and how to prevent it. Similarly, all the institutions must play a major role in educating the communities.

Over 3,080 Sick in Cholera Epidemic, 51 Dead

93WE0486A Guatemala City *EL GRAFICO* in Spanish
13 Jun 93 p 8

[Article by Arnoldo Cruz]

[Excerpts] Cholera, a disease caused by the bacterium known as *Vibrio cholerae*, has struck another blow to our country, affecting principally the citizens with the most limited economic resources. The first outbreaks were reported in 1991 and 1992, and currently, the "poor man's disease" is affecting 10 of the departments.

According to information in the hands of the General Health Services Directorate of the Ministry of Public Health and Social Welfare, the current outbreak had already been foreseen, and so it is strange that no intensive preventive campaign was undertaken.

After noting that there have been seven international pandemics since the 19th century in the epidemiological history of cholera, and that the seventh began in 1991, this office said that the disease reached the Americas in January of 1991, initially affecting Peru, Colombia, Chile, and Brazil.

It later spread to other South American countries and to Central America and Mexico.

The first case in Guatemala was reported in July of 1991, and by the end of that year, the health sectors had reported 3,664 cases and 50 deaths.

In 1992, the number of cases began to increase as of the week ending on 18 April, coinciding with the activities of Holy Week and with the beginning of the rainy season a little later.

The number of cases reported dropped after the week that ended on 29 August, but by the end of 1992, 15,861 cases and 277 deaths had been reported.

According to the General Health Services Directorate, a comparison of the trend seen in the disease in the final weeks of 1991 and 1992 and the early weeks of 1992 and 1993 suggests that after Holy Week this year, an increase similar to that seen last year might occur. This is because there are factors such as the concentrations of people and the consumption of foods from street vendors characteristic of this period, in addition to the beginning of the rainy season and the abandonment of preventive measures on the part of the population, that favor transmission of the disease.

1993 Cases by Department	
Suchitepequez	1,154
Escuintla	589
Zacapa	401
Guatemala	356
Quiche	142
Peten	64
Retalhuleu	60
Quetzaltenango	59
Izabal	49
Chiquimula	47
Balance of the Republic	166

The Departmental Breakdown

According to the above information, major epidemic outbreaks have occurred in some departments of the country since April. They have in some cases been related to the annual migratory movements to and from the high plateau area and the southern coast.

Among the most serious outbreaks, in terms of the number of cases and deaths reported thus far this year, "those that occurred in the department of Suchitepequez, some municipalities in Escuintla and Quiche, and, more recently, in the capital (Zone 18, specifically), Quetzaltenango, Totonicapan, Jalapa, Solola, and Chimaltenango should be noted."

Up until the week ending on 29 May of this year, the health services had reported 3,087 cases of cholera and 51 deaths from this disease. The largest numbers of cases were reported in the departments of Suchitepequez, Escuintla, Zacapa, Guatemala, and Quiche. These cases, taken together, accounted for 85.6 percent of the total. [passage omitted]

Chronology of the 1993 Outbreaks

20-28 January, at the Palo Gordo Sugar Mill (26 cases).

20-25 February, at the Palo Gordo Sugar Mill (10 cases).

12-14 March, at the Palo Gordo Sugar Mill (99 cases).

28 March, on the Palo Gacho Ranch in Puerto de San Jose (51 cases among the immigrants from Huehuetenango, Quiche, El Progreso, Santa Rosa, and Alta Verapaz).

11 April, in Joyabaj, Quiche (108 cases and 17 deaths among migrants returning from the southern coast).

15-20 April, in the village of El Pato, Sayaxche, Peten (eight cases).

17 April, at the Palo Gordo Sugar Mill, and spreading to the rest of Suchitepequez. The municipalities most seriously affected at present are San Bernardino and Cuyotenango.

Pueblo Nuevo and Zunilito have not been affected. A total of 1,106 unconfirmed cases and 88 confirmed cases have been reported between January and the present. Nine deaths.

6 May, in the village of Suchiquer, Chiquimula (11 cases and one death).

21 May, in the village of Pachipac, Nahuala, Solola (six cases and one death), and the hamlet of El Adelanto, Solola (four cases).

30 May, in the municipalities of Coatepeque and La Esperanza, Quetzaltenango (13 cases). Currently in Concepcion Chiquirichapa (13 cases).

In the middle of May, eight cases were reported in the municipalities of Totonicapan, in Santa Lucia La Reforma (one case and one death), and Momostenango (one case).

1 June, in the village of La Cumbre, San Pedro Pinula, Jalapa (22 cases and one death, although a visit to the locality made it possible to identify 120 cases and five deaths).

1 June, in the village of Animas Lomas, Jutiapa (seven cases and one death).

In the area north of the metropolitan region, an outbreak began on 14 May, centered in Zone 18 (kilometer markers 9-15 on the Atlantico Road).

Between the 17th and the 21st epidemiological weeks, 564 cases were reported, as follows: 42 cases in the 17th week, 111 in the 18th, 89 in the 19th, 105 in the 20th, and 217 in the 21st.

8 June, in Santiago Atitlan, Solola (11 cases suspected).

8 June, in Acatenango (the outbreak began on 29 May, and 19 cases and one death have been reported).

Reports of Cases Increasing

The General Health Services Directorate is in possession of data that reveal the dimensions of the disease.

In 1991, 3,664 cases were reported. There were 15,861 in 1992, and 3,087 in the portion of 1993 to date. The overall total comes to 22,612.

Where the number of deaths caused by this disease is concerned, the reports from the health sectors indicate that there were 50 in 1991, 227 in 1992, and 51 thus far in 1993.

Minister of Public Health and Social Welfare Eusebio del Cid Peralta said Friday that 427 cases have been reported in the capital, more than 1,000 in Suchitepequez, 37 in Totonicapan, 125 in Jalapa, 8 in Jutiapa, and 11 in Solola.

HONDURAS

Cholera Victims Number 520 Sick, 33 Dead

93WE0471A Tegucigalpa *EL HERALDO* in Spanish
15 Jun 93 p 3

[Text] The public health authorities reported 12 new cases of cholera over the weekend, for a total of 520 cases—including 33 deaths—since the epidemic began in 1991.

Ricardo Ochoa Alcantara, assistant director general of public health, reported that of these new cases, seven are from Francisco Morazan Department, and of these seven, five are from Tegucigalpa, one from El Porvenir, and one from Reitoca.

Of the remaining cases, two are from Santa Barbara Department and two from Choluteca Department—including one from San Antonio de Flores and another from Orocina—and one case is from Valle Department.

"The best barrier that people can erect against cholera," Alcantara declared, "is their mouths. In other words, prevent the ingestion of contaminated food."

He added, however, that even though the incidence of cases declined substantially during the dry season, rumors

continue that unfortunately could influence closed minds to believe that modern therapeutic resources are not being used and that cholera will continue to rage, as in past eras—a completely mistaken concept.

If people apply in time to the unit that provides their health services, he said, the disease can be cured.

"Our operating procedure was established last year," Alcantara explained. "As soon as we spot a suspicious case, we begin an investigation and intensify our activities in the areas of education and sanitation."

VENEZUELA

Incidence, Treatment of Leprosy Reviewed

93WE0495A Caracas *EL NACIONAL* in Spanish
11 Jul 93 p C4

[Article by Teresita Hernandez]

[Excerpt] [Passage omitted] During the past 40 years, the incidence of leprosy in the country has declined. From the 16 cases per 1,000 inhabitants recorded in 1951, there was a reduction to one per 1,000 in 1990.

In 1991, 13,616 cases were recorded in the country, and they are now under control. The number of new cases discovered from 1980 to 1989 was 4,015, but Jacinto Convit points out that this increase does not indicate a worsening of the situation, but rather reflects an improvement in surveillance.

During 1981, the Institute of Biomedicine divided the country into three areas: The high prevalence area, with over two cases per 1,000 inhabitants, includes the states of Merida, Tachira, Trujillo, Barinas, and Apure. The area of medium prevalence, with one or two cases per 1,000 inhabitants, includes the states of Nueva Esparta, Portuguesa, and Guarico, and the Federal District. And the area of low prevalence, with less than one case per 1,000 inhabitants, covers the rest of Venezuela.

These studies also proved that the prevalence or incidence of the disease assumes major proportions in small communities, municipalities, and settlements, where incidences ranging from five to nearly 20 cases per 1,000 inhabitants have been found. It is in those small populated areas, precisely, that the Health Project is engaged in integrating its activities relating to tuberculosis, malaria, and the other endemic diseases.

The program against leprosy is also providing health education, aimed at a change in attitudes toward the disease, by focusing on the fact that it is curable and has a low infection rate, as well as focusing on the benefits of immuno-prophylaxis. In other words, it is using the vaccine of Jacinto Convit and his group, prepared on the basis of dead *Microbacterium leprae* and BCG [Calmette-Guerin bacillus].

In some areas, rehabilitation activities are also being carried out to reduce the disabilities of patients who have lost feeling, especially in their hands and feet, and who tend to sustain injuries during routine activities.

Treatment

For many years, the only treatment for leprosy was dapsone, a medication that stops the multiplication of the bacteria. The treatment was lengthy, sometimes lasting a lifetime, but there was risk of a relapse, and resistance to this drug appeared in many areas.

Nevertheless, a new multidrug therapy (MDT), recently developed, has been used in Venezuela since 1985. A total of 5,445 patients have received it, with 87 percent coverage. Based on this percentage, Venezuela may possibly be the country conducting the most advanced program in the world for treatment and control of cases. This therapy has been implemented in all states except Tachira, Merida, and Apure, where immuno-prophylaxis is being tested. Bolivar is also excluded, owing to the difficulty of access and other problems associated with these border regions.

The Institute of Biomedicine is working on immuno-therapy as well, using the same compound that is being tested as a vaccine. Thus far, the institute has been

encouraged by the immuno-therapy results, because 85 percent of the patients treated have responded positively.

Venezuela is among the countries currently working to prevent the disease through vaccination. The goal is to reduce both prevalence and incidence by protecting high risk contacts. The areas with a high degree of prevalence, namely, Apure, Tachira, and part of Merida, were selected for an immuno-prophylaxis study testing a vaccine that is a compound of dead *M. leprae* and BCG.

At the beginning of the study, an epidemiological survey was made, in which 2,294 cases were recorded, and 64,572 contacts, that is, persons at high risk of contracting the disease, were identified. Of that number, 29,116 received the vaccine. The contacts are examined every year and, thus far, the Institute of Biomedicine using this vaccine of Jacinto Convit and his team have been encouraged by the results. It hopes to extend the program to all of the country's endemic areas.

AFGHANISTAN

'Serious' Cholera Outbreak Reported

93LA0147Z Tehran TEHRAN TIMES in English
28 Jul 93 p 16

[Article: "Cholera Outbreak in Afghanistan Serious"]

[Text] Islamabad (AFP)—An outbreak of cholera in Afghanistan is serious, a UN report released here said Wednesday.

Cholera cases have been reported from 14 of Afghanistan's 29 provinces, according to the report issued by the office of the UN Coordinator for Humanitarian Assistance of Afghanistan Sotirios Mousouris.

The report said a World Health Organization team which visited Kabul from July 14 to 16 found that 3,000 people showing cholera symptoms were admitted to hospitals in the Afghan capital during the period.

The Afghan government has officially declared a cholera outbreak and established a national coordination committee in which different UN agencies are taking part, the report said.

A UN task force was also set up by Mousouris last week to meet regularly and take action to address the cholera outbreak in Afghanistan, it added.

INDIA

New Cholera Strain in Tamil Nadu Epidemic

93WE0508 Madras THE HINDU in English
19 Jun 93 p 3

[Text] Madras, June 18—A new strain of cholera, designated Vibrio Cholerae O 139, has been isolated during the recent epidemic in Tamil Nadu and people immune to the earlier forms of the disease are not immune to this strain, according to Dr. B.C. Deb, scientist, National Institute of Cholera and Enteric Diseases (NICED), Calcutta.

A majority of the cholera cases seen were due to Non Agglutinating (NAG) vibrios, he said while delivering the keynote address at a workshop on 'Recent scenario of cholera and food microbiology and food hygiene,' organised here today by the Indian Association of Medical Microbiologists, Tamil Nadu and Pondicherry, and King Institute of Preventive Medicine. He said similar strains were isolated in Calcutta last year. About 300 samples were obtained from Tamil Nadu by the NICED for testing, as many as 271 were found to be infected with Vibrio Cholerae O 139.

Admissions to the Infectious Diseases Hospital, Calcutta, this year stood at an all time high of about 5,000 patients, compared to around 2,000 in 1992. Of the 360 cholera patients' samples tested, more than 50 percent were found infected with the new variation of the bacteria. The patients developed severe dehydration within 14 hours of showing symptoms of cholera.

The new bacterial strain however had the same channels of transmissions as the others—water, sediments and planktons.

Little potable water. Tamil Nadu had one of the lowest availability of potable water, in the country, said the Health Secretary, Mr. K. Inbasagaran. He wanted medical personnel in the districts to assume greater responsibility and track down the source of infectious diseases before they assume epidemic proportions. Doctors could identify the endemic areas and the people could be educated.

The Vice-Chancellor of the Tamil Nadu Dr. MGR Medical University, Dr. B.P. Rajan, said the new strain of the virus isolated had the potential to trigger another epidemic. Even after years of progress in research, cholera and gasteroenteritis were yet to be controlled. Medical, paramedical personnel and those responsible for providing protected water supply should work together to control them.

Inaugurating the scientific session, the Director of Medical Education, Dr. P. Sushila Raj, called upon the younger generation to take up research in the field. Information on the disease should be shared and updated periodically through seminars and workshops so that cures could be arrived at an earlier date.

Preparation, storage and serving the food materials without bacterial contamination were essential to prevent infections, said the Director of Rural and Medical Health Services, Dr. S. Premila.

Preventive aspects: The Director of Public Health and Preventive Medicine, Dr. A. Ramalingeswara Rao, said people should be made aware of the various aspects of prevention of infectious diseases.

Drinking boiled water and avoiding open defecation were among the steps that had to be taken. Till such time proper sanitation was provided, the vaccination programme, should be continued said medical officers of the King Institute. Disposable syringes and needles should be used to ensure that cross-infections did not occur.

About 120 microbiologists from the country participated in the day-long workshop and about 20 papers were presented. The Director, King Institute of Preventive Medicine, Dr. J. Vijayakumar, welcomed the gathering. The organising secretary of the workshop, Dr. Aruna Palaniyappan, proposed a vote of thanks.

Shortcomings in Leprosy Eradication Noted

93WE0510 Bombay THE TIMES OF INDIA in English 9 Jun 93 p 5

[Article by Sandhya Srinivasan]

[Text] Bombay, June 8—The government's involvement in the Greater Bombay leprosy eradication programme was, till 1983, limited to municipal funding of the Aeworth Leprosy Hospital. However, even the 36 lakh population covered by state and municipal treatment centres today is poorly served by a programme which is more interested in producing statistics to show that leprosy is under control.

The programme is run by seven NGOs, four state governments supervisory urban leprosy units (SULUs) and the Acworth Municipal Leprosy Hospital, in different parts of the city.

Since 1983, they have been coordinated by the state government and the BMC; every year, they are assigned targets for the detection, treatment and cure of leprosy cases, on which they must give monthly reports. Drugs are supplied through a government-run drug distribution network since the last 2 years.

But the much touted drops in caseload (from 80,000 to 8,000) in less than a decade and in prevalence (from six to 1.76 per 1,000 in the same period) present a misleading picture. For, according to leprologists, the government is not doing the job at hand—screening the entire population, identifying infectious multi-bacillary (MB) cases, and providing regular treatment for all detected leprosy patients.

First, though MB cases are epidemiologically more significant since they transmit the disease, the target for detection does not differentiate between the milder paucibacillary (PB) and the infectious MB cases. "The present system doesn't encourage workers to trace and treat infectious cases," says Dr R. Ganapathy, director, Bombay Leprosy Project.

Second, SULUs (which achieved a surprising 104 percent of their targets for detection of new cases this year, compared to 51.67 percent for six of the seven NGOs) and the municipal programme may not be screening their project populations properly. The two cover populations of at least 23 lakh and 13 lakh respectively.

According to Dr A.P. Poddar, assistant director of health services (leprosy), Maharashtra, SULUs overachieve because, unlike some NGOs, they have the required staff. Also, since some SULUs operate in relatively wealthy localities, with low prevalence, their targets are smaller, and easier to achieve.

But the targets may be unrealistically low. Without a baseline survey, no one really knows the prevalence in SULU areas, though it is officially just 0.38 per 1,000, compared to the city average of 1.76 per 1,000. "The population covered by SULUs is not adequately surveyed," says Dr W.S. Bhatki, deputy superintendent of Acworth. The SULUs cover B, C, D, K(E) and R wards. Though wealthier residents are less prone to infection, the living conditions of slum and pavement dwellers and even chawl residents encourage all sorts of infections, including leprosy.

Knowledgeable health workers dismiss, in particular, the official slum prevalence in the SULU areas of 0.63 per 1,000. "There is considerable migration in Bombay, especially in the slum areas. Without a comprehensive survey, it is impossible to arrive at any figure," says one experienced field worker.

The problem is compounded by the fact that the upper middle class refuse to be examined by health workers, preferring to see a private doctor when they notice a

suspicious patch—which may be after the disease has progressed considerably. And though leprosy is a notifiable disease, reportedly constituting 25-30 percent of private dermatology practice, private doctors don't report these cases to the programme.

If the SULU population is poorly screened, another 13 lakh population in E and F (South) wards is hardly screened at all, because the Acworth Municipal Leprosy Hospital, whose field area it is, has not had field staff for the last six years pending a court case. Reportedly, the state government had at one time deputed staff to Acworth, but this was later stopped.

The third requirement of a good programme is to treat registered patients. But without field staff, Acworth could treat just 52.5 percent of its caseload of 1,204 patients as of March 1993, depriving almost 600 registered patients of treatment.

In comparison, NGOs treated 92 percent of their 5,435 patients and SULUs treated 98 percent of their 968 patients during the same period. Dr B.N. Mittal, director general of the national leprosy eradication programme, points out that the state government should depute staff to Acworth, instead of letting patients go without treatment.

Poor NGO-government relations are also a constant irritant in the programme functioning. The government feels NGOs, which cover the majority of the population, do not follow government-suggested staffing patterns and are often unco-operative. NGOs complain that the government is more obsessed with targets than the work they do, even though they have proportionately fewer staff, who are paid less than the government workers. The records show that with just 85 staff, NGOs cover 70 percent of the city's population, and detected 4,350 cases last year, with 5,400 patients under treatment. In comparison, the SULUs, with 40 staff, detected 1,469 cases, and treated 978 patients.

IRAN

Outbreak of Cholera, Plague in Shiraz Refuted
93LA0138T Tehran JOMHURI-YE ESLAMI in Persian
28 Jun 93 p 4

[Text] Shiraz—JOMHURI-YE ESLAM. The spread of cholera and plague in Shiraz was vehemently denied.

Dr. Amiri, executive director of the Province of Fars Health Care and Treatment Organization, announced the denial of the spread of cholera and plague at a gathering of reporters. He said: Such a disease could not exist easily and if it did it would be able to kill a lot of people in a very short time, and we strongly deny the existence of cholera and plague.

He said: So far no cases of cholera or plague have been seen. These diseases were uprooted from Iran years ago, especially in the province of Fars, where they have no kind of record or generality.

The executive director of the province of Fars Health Care and Treatment Organization added: Health care officials in the province have always tried to take timely steps to deal with contagious diseases and they have been 100 percent successful. In health care matters, if there is a case of any kind of disease, we warn the people to take preventive measures, such as not using certain health care materials.

In conclusion, Dr. Amiri discussed the high water levels in the south of Shiraz and its relation to disease. He said: When bacteria destroys its host, it itself loses the power to react. This has nothing to do with the high water. Each disease has its own special cycle. He called upon the martyr-nurturing people, especially in the province of Fars, not to pay attention to these rumors and to be assured that in the province we have no acute diseases or difficult health problems. He also urged the people to observe health care considerations in the consumption of fruit during the warm season, and not to pay attention to rumors.

Decrease in Infant Deaths From Diarrhea Reported

93L40181X Tehran JAHAN-E ESLAM in Persian
10 Jul 93 p 3

[Text] In implementing the government's health-care programs to combat diarrhea, the mortality rate from this disease for children under age 10 has fallen to 70 percent.

During a reeducation seminar on controlling diarrhea held in Qom on Thursday, the chief of the Qom Health Care Center said: At the beginning of this project in the years 1360 [21 Mar 1981-20 Mar 1982], 1363 [21 Mar 1984-20 Mar 1985] and 1364 [21 Mar 1985-20 Mar 1986], there were 34,000 deaths of children under the age of 10, and as the result of measures taken, this figure has dropped to 10,000.

Dr. Tamoli said that this reduction is the result of the comprehensive cooperation of the World Health Organization with Iran to control and prevent diarrhea. He said that in this project patients were treated with the drug URS and the excessive use of drugs and antibiotics was prevented.

Among other measures taken by the Ministry of Health Care, Treatment and Medical Education, he mentioned the campaign against acute child respiratory diseases and noted: Immunization against acute respiratory disease under these circumstances is the primary factor in the deaths of 12,500 of the nation's children in the year 1370 [21 Mar 1991-20 Mar 1992]. [sentence as published]

On the same occasion the one-day reeducation seminar for physicians and specialists in children's diseases was held in Qom, with the cooperation of the Martyr Beheshti Medical Sciences University and with the assistance of the province of Tehran Health Care Office.

At this scientific meeting, attended by the general manager of family health care and members of the faculty of the

Medical Sciences University, participants became familiar with the latest scientific advances in fighting diarrhea.

JORDAN

Typhoid Diagnosed in Ajlun Hospital Cases

2 of 49 Cases Diagnosed as Typhoid

JN0509102593 Amman JORDAN TIMES in English
5 Sep 93 p 3

[Text] Amman (Petra)—Only two cases out of 49 admitted to hospital in Ajlun last week for treatment were diagnosed as typhoid, Health Minister 'Abd-al-Rahim Malhas announced Saturday.

The 49 patients admitted to al-Imam Hospital in Ajlun were complaining of high fever, but tests and cultures conducted on the urine, stool and blood of these patients proved to be normal fever cases, not typhoid, said the minister.

In addition, the Health Department conducted tests on samples of food and beverages taken from street vendors and tested samples of water taken from different sources to determine the cause of the fever that affected Ajlun citizens, including many children, Dr. Malhas said.

He added that the fever could arise from different causes and not necessarily typhoid.

"The tests have proved that the water of the local springs was quite safe and potable and free of typhoid microbes and this is a very reassuring result," said the minister adding that the ministry was maintaining strict surveillance over the situation.

He said 19 patients have been discharged from hospital after receiving the necessary medication; the others are expected to leave hospital in the coming 2 days.

The ministry of health, said Dr. Malhas, was keen on informing the public about the facts of the health situation.

"The health ministry would like to reassure the public that there is no cause for alarm because there is no danger of an epidemic, although typhoid is one of the known diseases that is endemic in the region," said the minister.

Dr. Malhas cautioned the public not to eat vegetables and fruits without first washing them thoroughly and said precautionary measures concerning public safety should be strictly heeded.

Health Minister Confirms Typhoid in 10 of 72 Cases

JN0709091493 Amman JORDAN TIMES in English
7 Sep 93 p 3

[By JORDAN TIMES staff reporter Iliya Nasrallah]

[Text] Amman—Of the 72 cases admitted so far to al-Iman Hospital in Ajlun over the past 10 days, only 10 are confirmed positive typhoid cases as proved by laboratory culture tests. Health Minister 'Abd-al-Rahim Malhas announced Monday.

Dr. Malhas told the JORDAN TIMES that he himself visited the Ajlun area Monday morning and examined the patients under treatment at the hospital.

He said "the 72 cases were all treated as typhoid cases on purely clinical grounds, although the culture tests on them proved that only 10 patients had typhoid."

"The hospital is now treating 31 fever cases including the 10 with typhoid, and most of them are expected to be discharged in two to three days," said the minister.

"As soon as the first of the fever cases was admitted to hospital on Aug. 28, there were clinical doubts that typhoid was the cause of the fever, but culture tests conducted on samples of stool, blood and urine taken from all the 72 patients resulted in 10 positive typhoid cases only," said Dr. Malhas.

The minister said the health authorities are taking every precaution to prevent the spread of the disease, stressing that health teams are working diligently to discover the direct cause of the typhoid cases.

He said, however, that two cases of fever Monday were admitted to Princess Basmah Hospital in Irbid and are being treated similarly to the Ajlun cases as they are suspected to be typhoid cases as well.

Saying that typhoid is an endemic disease in Jordan, Dr. Malhas said the fever cases generally flare up in summer, when water is scarce and vegetables and fruits are not sufficiently cleaned before consumption.

"Normally, typhoid involves a 2 or 3-week incubation period and so these cases must have started during the heat wave that affected Jordan in the past month," added the minister.

"Our health teams are now taking samples of water from different areas and springs, as well as from ice cream, eggs, chicken and the stool, blood and urine of persons who came in contact with the proved typhoid patients, in order to determine the source of the illness," continued Dr. Malhas.

In order to reach a final result, the health authorities need between two to three months during which cultures on samples including food and beverages are tested, Dr. Malhas explained.

The minister concluded by saying that there was no cause for worry or concern as the health authorities have everything under control.

He said precautionary measures are being taken not only in the Ajlun area, but throughout the Kingdom.

MOROCCO

Health Minister Denies Cholera Epidemic

LD1008142693 Rabat MAP in English 1325 GMT 10 Aug 93

[Text] Rabat, Aug. 10 (MAP)—'There is no cholera epidemic in Morocco. The very few cases in some rural areas are well controlled by health services', said Monday Moroccan Health Minister Abderrahmane Haroushi. In a statement aired by the Tangiers-based Radio 'Midi.1', Haroushi said there is no cholera epidemic similar to the ones witnessed in the past. In Morocco, as in the majority of third world countries, there are sometimes cholera epidemics in some rural regions where the conditions of hygiene are not observed, the Moroccan official said.

He said the three major factors of cholera transmission are contaminated water, especially that of wells and springs, contaminated water irrigated vegetables and dirty hands. Haroushi underlined the role the media should play in fostering public awareness to the importance of hygiene and said Moroccan hospitals are well equipped to cope with the endemic [as received].

SUDAN

Meningitis Claims 190 Lives

93WE0453A Cairo AL-AHRAM AL-DUWALI in Arabic 20 Jun 93 p 1

[Article: "Total of 190 Deaths in Sudan From Meningitis"]

[Text] Khartoum—MENA—Deaths from meningitis in all parts of Sudan have amounted to 190 cases out of a total of 965 infected cases. Dr. Hashim 'Ali-al-Din, director of the Sudanese Health Ministry's Communicable Diseases Department, said that the mortality rate amounted to 16 percent of the total number of cases, compared to 11 percent in the past 2 years.

REGIONAL AFFAIRS

Incidence of Cholera Worries CIS Authorities

PM1908100993 Moscow KRASNAYA ZVEZDA in Russian 18 Aug 93 p 4

[Report by Sergey Prokopenko: "Imported... Cholera. Disease Situation in CIS Still Worrying"]

[Text] If you believe the statistics, infectious diseases are on the increase throughout the world. Last year alone a total of more than 461,000 diseases was recorded and in a few months this year the figure is more than 118,000. The major "exporters" of cholera, for example, are such countries as Afghanistan, Pakistan, India, Syria, and Turkey. It is from there that the disease has been imported into the CIS countries, in particular Russia, in recent years.

This year cases of cholera have been recorded in Krasnodar, Makhachkala, and Nizhniy Novgorod. Experts from the Russian Federation State Committee for Health and Epidemiological Monitoring reckon that the disease has become so widespread because of the intensification of migration processes and the expansion of the trade in foodstuffs and other goods.

Another cause of the spread of diseases is refugees from trouble spots, where the disease situation remains complex. Refugees returning to Tajikistan from Afghanistan brought a cholera epidemic with them to the republic. According to some data, around 150 sufferers have been identified, more than 40 of whom have died. In this extremely stressful situation, the Russian Federation Defense Ministry Main Medical Directorate announced, military doctors are taking all possible steps to prevent the spread of the disease among the servicemen of the 201st motorized rifle division and Russian border guards protecting the Tajik-Afghan border.

The appearance of cholera in Moscow is obviously worrying. As is known, a 48-year-old vagrant was found at Kurskiy Station in a serious condition. When he was hospitalized he was found to be infected with the cholera vibrio. Symptoms of the disease were also identified in an orderly who had failed to observe the basic rules of hygiene when looking after the patient. It is a disturbing fact that this case of the disease occurred in Russia and was not imported from outside.

RUSSIA

Infectious Diseases Introduced From Other Republics

LD2308084793 Moscow Radio Rossii Network in Russian 0700 GMT 23 Aug 93

[Text] The Russian Federation State Committee for Sanitary and Epidemiological Inspection warns of the possibility of outbreaks of serious infectious diseases. This is connected with the fact that there are no real frontiers between Russia and the former republics and that sick people can cross them. This year in Makhachkala, Nizhniy

Novgorod, Krasnodar, and Naberezhnye Chelny, 17 people suffering from cholera or carriers of its agents have been registered.

In general, the situation regarding the sickness rate from acute intestinal infections in Russia remains complex. Up to 2 million cases of such diseases are registered annually because of shortcomings in supplying the population with good quality food products. The measures for protection from infectious diseases have long been known: Don't drink unboiled water, don't eat unwashed vegetables and fruit, and wash your hands before eating.

Case of Cholera Registered in Moscow

Precautionary Measures Urged

LD1108182593 Moscow Ostankino Television First Channel Network in Russian 1700 GMT 11 Aug 93

[from the "Novosti" newscast]

[Text] An unwelcome guest has visited the capital. A case of cholera has been registered in Moscow. (Gennadiy Onishchenko), chairman of the State Committee for Sanitary and Epidemic Control, told our correspondent. The tramp who has contracted the disease is in a grave condition. His contacts have not yet been established. Doctors stress the need to observe all precautionary measures.

Case Detailed; Warning Given on Mushroom Poisoning

PM1708161793 Moscow IZVESTIYA in Russian 14 Aug 93 First Edition p 2

[Svetlana Tutorskaya report: "One Cholera Case Registered in Moscow, Specialists From Russian State Committee for Sanitary and Epidemiological Supervision Report"]

[Text] On 8 August one Shabunov, of no fixed address, was admitted as a patient to the reanimation unit of Moscow's Third Clinical Hospital. He was unconscious and his blood pressure was almost zero. Tests showed that he had vibrio El Tor cholera.

The patient's condition has now improved. Of the 20 people who were in contact with him, one nurse was infected. Another person, a driver, the subject of a lot of rumors, is in good health.

There are 17 infected people and vibrio carriers in Russia in all: in Dagestan, Nizhniy Novgorod, Krasnodar, and Naberezhnye Chelny. Of these, "our own," local contagion has been in Dagestan and Moscow. The other cases are connected with contagion brought in from India, Pakistan, and Turkey.

One patient in Kaspiysk has died; it was too late when he contacted a doctor. The cholera vibrio has been detected in a 4-month-old child named Babatov—he is in the republic hospital in Makhachkala.

Cholera is not a fatal disease if diagnosed by doctors during the first signs of intestinal problems. Until the situation is fully normalized (and August is the most

dangerous month for cholera), doctors are recommending that untreated water should not be drunk, particularly from open water sources. The cholera pathogen was detected in water in open sources even in the relatively good years of 1991-1992. Unwashed fruit and vegetables are dangerous, and it is important to remember the rules of personal hygiene.

The State Committee for Sanitary and Epidemiological Supervision has taken emergency measures, and all plague-control institutions have been placed on cholera alert. Doctors are not expecting the disease to spread extensively in Russia. Foreign agency reports concerning the large number of people suffering from cholera and malaria are erroneous (especially in the latter case—there are no malaria cases).

There are now over 100 cases in Tajikistan, and several dozen people have died. A detachment of specialists has gone there.

Another danger this summer is mushroom poisoning. This cause of poisoning has been established with certainty in Voronezh, Lipetsk, Tambov, and other oblasts. All fatal cases have been caused by the fact that death caps have found their way into food. This was established with the help of the best reagents and equipment, and there were no other causes. In Voronezh Oblast 52 people have been poisoned since June, and one person has died. In Tambov the figures are 46 and eight respectively, and in Lipetsk—23 and four. The mushroom specimens examined in these localities contain pesticides and salts of heavy metals, but these concentrates cannot cause acute poisoning.

It is worth noting that if even a small piece of death cap finds its way into the general fry-up this can result in the poisoning of several people. Small children often put these mushrooms into the collecting basket. Doctors have tried examining the contents of baskets carried by mushroom pickers emerging from the forest. And what was the result? A death cap was discovered in one basket in eight.

Recent research both in our country and abroad has shown that it is dangerous to use flat cap mushrooms in food. They cause a serious allergy.

Cholera Suspects Hospitalized Following Flight From Turkey

PM1308140993 Moscow ROSSIYSKAYA GAZETA in Russian 10 Aug 93 First Edition p 4

[Unattributed report under "Yesterday, Today, Tomorrow" rubric: "Import of Cholera From Turkey"]

[Text] A passenger with signs of having a serious form of cholera was taken off an airplane that had arrived in Krasnodar from Turkey.

Furthermore, three suspected cholera cases have been hospitalized, as well as 27 passengers who have been in contact with them. As the State Committee for Affairs of Civil Defense, Emergency Situations, and Elimination of Natural Disasters press service reports, the patients are being examined at the city's contagious diseases hospital.

Cholera, Plague in Kazakhstan Alarms Orenburg

PM0408122593 Moscow ROSSIYSKAYA GAZETA in Russian 4 Aug 93 First Edition p 3

[Unattributed, untitled report from the "24 Hours" column]

[Text] Orenburg medics are concerned over outbreaks of cholera and plague in neighboring Kazakhstan. This was reported at a session of the oblast emergency anti-epidemiological commission. The Orenburg area authorities are planning to take the most resolute measures to stop the further spread of the dangerous infections which have struck Aktyubinsk Oblast's inhabitants.

Krasnodar Cholera Victims Seek To Conceal Symptoms

PM1908150593 Moscow IZVESTIYA in Russian 18 Aug 93 First Edition p 8

[Andrey Aderekhin report: "Cholera Arrived in Krasnodar From Turkey by Plane"]

[Text] Krasnodar—A "cholera episode" developed in the Kuban more or less along the lines of a detective story. True, it managed not to have a tragic outcome.

From on board an airplane flying from Trabzon to Krasnodar the ground was informed that one of the passengers was in need of urgent medical attention. Doctors met the airplane on the airfield. The patient had already lost consciousness, his blood pressure was almost zero...

The 53-year-old male patient was dispatched to an infectious diseases hospital. However, there were another 27 members of the tour group as well as six passengers from Krasnodar and six Turkish citizens who had arrived on the same airplane. The Turks refused an examination and dispersed at the airport and went about their own business. The six residents of Krasnodar, having passed through customs, simply disappeared. But that night they were collected from their homes in ambulances. And as for the tourist group from Naberezhnye Chelny—it had, despite its protests, to be detained and hospitalized.

"The next day almost all of them were sent home to Naberezhnye Chelny on a special flight," M. Mkrtchan, deputy chief doctor at the kray health and epidemiological monitoring center, reported. But we did not escape without incident—the group had for some reason "substituted" two healthy people for those with cholera-like symptoms here... Laboratory tests confirmed the diagnosis of two tourists, who are for the moment remaining in our hospital. Later on, tests carried out on samples which we took showed that five more of the people who had flown out were also secreting the organism giving rise to cholera. We, of course, immediately informed our colleagues in Naberezhnye Chelny about this.

It transpired that the group from Naberezhnye Chelny had been in Syria prior to arriving in Turkey. The man who was barely alive when he flew into Krasnodar, had already been feeling ill for several days, but concealed his condition and tried to treat himself. I was told at the kray

health and epidemiological monitoring center that his illness had been noticed within the group, but they had decided not to go to the doctor's. Evidently, the fear of difficulties had an influence here—you see this was a business trip, the group was carrying many goods from abroad..."

Now the patients' conditions are improving. No other cases of cholera have been recorded in the Kuban.

State Panel Cites Tyumen Oblast River as Typhoid Source

PM1308081393 Moscow ROSSIYSKIYE VESTI in Russian 10 Aug 93 p 8

[EAN report: "Disease Returns"]

[Text] Tyumen Oblast—Eight cases of typhoid have been recorded in Abatskiy Rayon during 1993. Two children are among those who have fallen ill. The State Committee for Sanitary and Epidemiological Supervision is assuming that the source of the infection is water from the Ishim River which some local inhabitants are using in its untreated state. In order to prevent an epidemic, workers from this service have banned the use of water from the Ishim and bathing in the river.

Typhoid Outbreak Blamed on State of Water, Sewerage Network

PM0609104193 Moscow IZVESTIYA in Russian 31 Aug 93 First Edition p 2

[Lidiya Ivchenko report: "Outbreak of Diseases in Rostov Oblast"]

[Text] Medical workers in Rostov Oblast are attempting to deal with a major outbreak of typhoid: A total of 229 people including 77 children have fallen ill in Volgodonsk. In all, 358 people including 119 children have been hospitalized with a similar clinical condition, so the number of patients with this diagnosis will probably be much higher. This is the first time an outbreak on this scale has been recorded in recent years.

The outbreak has been traced to the state of the water and sewerage networks for which Rostov Oblast is particularly "famed." On this occasion two accidents in a row occurred in a water line at Volgodonsk, which was constructed in 1984 and had not required any subsequent servicing. The water and sewerage service did not fully disinfect the network or conduct the necessary laboratory tests... And an outbreak of infectious diseases occurred.

Patients initially came down with coli infection, a disease caused by *Escherichia coli*. A total of 125 people fell ill. Then came typhoid, which has a longer incubation period.

"According to our forecasts, we should expect to see infectious hepatitis next," V. Chiburayev, departmental chief of the State Committee for Sanitary and Epidemiological Supervision, said. "Because of this situation the oblast's emergency antiepidemic committee has gone into session, the case has been turned over to the Prosecutor's Office, and the question of removing the director of the

water and sewerage service has been raised. But there are many similar situations in Rostov Oblast. In the settlement of Aksay, for example, 190 people have fallen ill with dysentery after drinking poor quality water...."

The typhoid outbreak is now past its peak, and some patients are already being discharged from hospital. But unless the water supply is sorted out and measures are taken to deal with refugees and vagrants, new hotbeds of serious infectious diseases, for example typhus, could appear.

Diphtheria on Increase in Russia

4,000 Cases in first 6 Months

LD0408091193 Moscow ITAR-TASS World Service in Russian 0648 GMT 4 Aug 93

[By ITAR-TASS correspondent Veronika Romanenкова]

[Text] Moscow, 4 Aug—In the first 6 months of this year some 4,000 diphtheria cases have been recorded in Russia, about the same number as in the whole of 1992, and 104 people have died of the disease (last year's figure was 131). The situation is particularly bad in St. Petersburg, Moscow, Krasnodar, Moscow and Leningrad oblasts, Maritime kray, and Saratov oblast. An ITAR-TASS correspondent has learnt this from Anatoliy Monisov, deputy chairman of the State Committee for Sanitary and Epidemiological Inspection.

Specialists believe that the main cause of the steep rise in the number of cases is insufficient vaccination of the population. Many parents object to their children being vaccinated, whereas adults themselves ignore repeated inoculations. Nonetheless, vaccination remains the most reliable protection against diphtheria.

Anatoliy Monisov is also concerned by the fact that Russia has insufficient supplies of necessary medicinal preparations. Its enterprises were not ready for production of such large quantities of vaccine, and the technological process for its manufacture takes 4 to 8 months. Therefore, one can only expect the situation to get back to normal next year, the specialist believes.

2,717 Cases in first 10 Months of '92

93WE0276E Moscow KOMSOMOLSKAYA PRAVDA in Russian 16 Dec 92 p 2

[Article by V. Konstantinova: "We Have One More Line—For Vaccinations"]

[Text] To all our worries we have to add diphtheria. According to information from various agencies, the number of victims in Russia continues to grow. Last year 80 persons died from this infection, including 19 children. The results have not yet been tabulated for this year. But here is a report from Novosibirsk: According to data from the oblast hospital center of the sanitation and epidemiology station, 32 cases of diphtheria have been recorded for 10 months of this year. The record is a tragic one; after all, in the recent past no more than five persons per year fell victim to diphtheria in the city.

In Arkhangelsk the number of cases this year increased fourfold. Seven patients and ten carriers have been identified. Several victims were found at the same time at the Tsiglomensk Forestry School.

A total of 2,717 persons have fallen victim to diphtheria in Russia during the first 10 months, twofold more than last year.

The State Committee for Sanitation and Epidemiology Surveillance in Russia confirmed that the numbers are definitely increasing, but it is still premature to talk about an epidemic or epidemic outbreak. They advise people to stand in line for a vaccination, since adults also need to have them. Our fellow conversationalists unanimously asserted that there are no other ways of combatting diphtheria. And training, as some claim, does not solve the problem...

50 Hospitalized in Khakassia

PM1908153593 Moscow KOMSOMOLSKAYA
PRAVDA in Russian 18 Aug 93 p 1

[Text] A mass outbreak of diphtheria has been recorded in Abakan, the administrative center of Khakassia (a republic in the Russian Federation in southeast Siberia). A total of 50 people have been hospitalized in one of the local military units.

Kills 50 in Moscow Since January

AU0709121793 Paris AFP in English 1154 GMT
7 Sep 93

[Text] Moscow, Sept 7 (AFP)—Russian health officials said Tuesday that 50 people have died of diphtheria so far this year in Moscow.

Tatiana Pushkarenko, head of the Medical Department of the eastern section of Moscow, most strongly hit by the contagious disease, said four of the dead were children.

She said a lack of vaccines and antibiotics was aggravating the spread of the disease which has reappeared with the breakdown of hygiene and sanitation notably in big cities like Moscow and St. Petersburg.

The Health Ministry said at the end of August that more than 3,700 cases of diphtheria had been recorded in Russia since January.

Scabies, Diphtheria Cases, Fatalities Recorded

PM1208135193 Moscow KOMSOMOLSKAYA
PRAVDA in Russian 11 Aug 93 p 8

[Reports by NK-PRESS deputy editor Svetlana Besedovskaya and own correspondent Vladimir Zarovskiy under general headline: "Diphtheria and Scabies Know No Frontiers"]

[Text] A high level of morbidity from scabies and diphtheria has been recorded in St. Petersburg. True, in an interview with NK-PRESS Oleg Parkov, chief specialist of the St. Petersburg Health and Epidemiological Inspectorate, denied rumors of an alleged incipient epidemic in

the city. At the same time he stated that in July 1993 alone 333 scabies sufferers were recorded in the city. Of these, 78 were children under 14. The situation is complicated by the disastrous shortage of medicines in the city.

As for diphtheria, St. Petersburg is the leader among Russian cities in the number of cases and fatalities. In July alone 158 cases of diphtheria were recorded, of which eight resulted in death. [Besedovskaya ends]

[Zarovskiy] Vilnius—The first cases of diphtheria this year have been recorded in Lithuania. A mother and daughter from Kaunas fell ill 2 August, but went to the doctors only 4 days later. The daughter is in a critical state and is being kept in the resuscitation unit. There is a theory that they were infected by relatives from St. Petersburg.

Belgian Woman Reportedly Died of Diphtheria in Moscow

BR2708152193 Groot-Bijgaarden DE STANDAARD
in English 23 Aug 93 p 1

[Unattributed article: "Belgian Woman Dies of Diphtheria In Moscow"]

[Excerpt] Moscow—Last Wednesday [18 August], a 62-year old tourist from Schaerbeek [near Brussels] died of diphtheria in Moscow. This was announced by Belgian Consul Vincent Cauberg in the Russian capital, and confirmed by the Foreign Ministry in Brussels. The unmarried woman was traveling on her own and stayed with friends. The Association of Flemish Travel Agencies emphasizes that this case, unfortunate as it may be, should not frighten "conventional" tourists. There is no reason to panic.

According to a report handed over to the Belgian Embassy by the Russian authorities, the woman had already died in a Moscow hospital last Wednesday.

The 62-year old unmarried tourist had been in Russia since the beginning of the month. She was traveling on her own, without the assistance of a travel agency. Yesterday afternoon, there was hardly any information available on which other cities she would have visited besides Moscow. She was staying with friends.

On behalf of the Flemish Association of Travel Agencies, Antoon Van Eeckhout observed that "conventional" tourists have nothing to worry about. "For tourists going to traditional hotels, eating common food, and having normal contacts with the population, there is no problem whatsoever. Unfortunate as it may be for this woman, one fatal case of diphtheria should not be blown up out of all proportions. One single case should not jeopardize the complete traveling industry."

"Neither the Belgian, nor Russian authorities believe that special steps should be taken with regard to tourists. We should not be overzealous," Marc Lenaerts adds on behalf of the VTB [Flemish Tourist Association]. "We have three groups in Russia, and everything is running smoothly." [passage omitted]

Crimean Hemorrhagic Fever Hits Rostov Oblast

*PM2907133193 Moscow IZVESTIYA in Russian
28 Jul 93 First Edition p 8*

[Yuriy Bespalov report: "Dangerous Disease in Rostov Oblast: Two Fatalities Already"]

[Text] Rostov Oblast—Cases of Crimean Hemorrhagic Fever have been recorded in Rostov Oblast, as IZVESTIYA reported yesterday.

The scientific community considers that the most likely cycle of mass outbreaks of this highly dangerous and almost incurable disease is 25 years. In statistical terms, 1967-1968 recorded the largest number of cases of fever—they were in three-digit figures, and around one quarter of those infected could not be saved.

That is why the first four cases noted this year have caused serious alarm at the oblast sanitary and epidemiological supervision center. Hemorrhagic fever has exhibited itself in the settlement of Novaya Tsimpla, and two inhabitants of the city of Volgodonsk have become infected as a result of contact with a sick woman. Two of those infected have already died.

As Mikhail Shvager, deputy chief doctor of the oblast sanitary and epidemiological supervision center, explained, Crimean Hemorrhagic Fever is basically caught through tick bites, but if basic hygiene requirements are not observed it can be spread from person to person.

The greatest danger is presented by untended forest strips and parkland where there is a lot of brush, deadwood, and old haystacks and by places where livestock is driven. The sanitary and epidemiological specialists have taken emergency measures to reduce the danger of the infection spreading in Tsimlyanskiy, Belokalitvinskiy, and neighboring rayons of Rostov Oblast, where natural conditions produce the greatest likelihood of infection. The population in those rayons has been warned of the serious threat posed: People are advised to avoid places where the tick may concentrate, and stockraising units are advised to switch to keeping their stock in pens. Teams of foresters have begun strenuously clearing forest strips, parks, and wooded areas, particularly paths often used by local inhabitants.

Specialists of Rostov's Antipestilence Institute have collected natural matter from the centers of infection and carried out necessary research. So, according to Mikhail Shvager, the danger of transmission of the fever has been localized, although it has still not been ruled out completely. The main thing now is for vigilance to be displayed by the local inhabitants themselves. If the tick is correctly removed or you report to your doctor in good time this merciless disease can still be dealt with.

Sanitary and epidemiological specialists have issued warnings via the press to city-dwellers who enjoy relaxing in the

countryside. They are advised to choose picnic sites which are not covered by weeds or scrub and which are sufficiently distant from haystacks and pasturage.

Measles Outbreak Among Voronezh Youths

93WE02764 Moscow NEZAVISIMAYA GAZETA in Russian 25 Feb 93 p 2

[Article untitled, with a dateline of Voronezh]

[Text] There has been an outbreak of measles causing fever and unconsciousness among Voronezh residents since the beginning of the year—545 cases in January and already 356 cases in February. The oblast sanitation and epidemiology service and staffs at infection hospitals have been on alert. It is amazing that most of the victims have not been children, but rather students and adults. It is ironic that the "leaders" are students of medical and other institutes.

Khabarovsk Meningitis Outbreak Blamed on Water Pollution

LD2307145893 Moscow Mayak Radio Network in Russian 0900 GMT 23 Jul 93

[Text] Sixty-two children suspected of having serous-viral meningitis [serozno-virusnyy menigit] have been taken to the Khabarovsk children's hospital for infectious diseases. Liberova, chief doctor of the kray's sanitary inspection and epidemic service, said the situation is being evaluated as preepidemic. The heavy pollution of the Amur has served as the cause for the sharp jump in the incidence of this disease. The water quality has become menacing this year as a result of accidental discharges of sewage within the city because of the shutdown of major sewage stations. The sanitary inspection and epidemic service has closed the town's beaches and is conducting large-scale explanatory work with the population.

Venereal Disease in Voronezh Oblast

93WE0276J Moscow NEZAVISIMAYA GAZETA in Russian 4 Mar 93 p 6

[Article: "Dreaded Disease in the Province"]

[Text] Voronezh Oblast is experiencing a dramatic outbreak in venereal diseases. Voronezh lags behind Moscow in syphilis and gonorrhea morbidity but considerably exceeds the average Russian level. Thus, in January of this year three times more cases of syphilis were recorded than for the same period last year.

Medics are diagnosing approximately ten different sexually transmitted diseases in inhabitants of Voronezh Oblast. About 70 percent of the victims are single or divorced; 60 percent are between the ages of 18 and 30 years; and 57 percent of the victims became infected when drunk. Incidentally, the specialists of the oblast health department cannot get a complete pattern of morbidity due to the widely branched network of private venereology offices.

Outbreak of Malignant Anthrax in Altay

64 People Treated

LD1308092993 Moscow Radio Rossii Network
in Russian 0700 GMT 13 Aug 93

[Text] People suffering from malignant anthrax have been registered in Altay. Specialists from the kray center of the state sanitary and epidemiological authorities have recorded 64 cases of people who ate infected meat purchased from the Kometa shop in Barnaul. Two men are ill with the skin disease associated with malignant anthrax. Four people suspected of being ill have been hospitalized. Others are undergoing a course of preventive treatment.

According to ITAR-TASS, the guilty party comes from the village of Tundrikha—he sold a sick heifer through an intermediary in Barnaul. The shop accepted the meat without a veterinary or quality certificate, contravening elementary trade regulations. The shop assistants purchased the meat first.

Anthrax, Diphtheria Outbreaks

LD1608084893 Moscow ITAR-TASS World Service
in Russian 0728 GMT 16 Aug 93

[By ITAR-TASS correspondent Valentin Pavlov]

[Text] Barnaul, 16 Aug—Barnaul has been declared a high-risk zone. This decision was made at a session of the kray's commission for emergencies and was connected with the fact that meat infected with malignant anthrax was sold in one of the town's shops and 71 people are hospitalized suspected of having the disease.

The second and no less dangerous disease is diphtheria. An outbreak has begun in Pervomayskiy Rayon, and 11 people have already fallen ill there. The commission's session was told that there are already four centers of diphtheria epidemic around Barnaul. According to medical personnel, the outbreak is due to a disruption of the vaccination system. The fuss raised in the past over "the harmfulness of inoculations" has meant that only between 15 and 20 percent of inhabitants of the Altay have been inoculated. Doctors are now being forced to begin a wide-scale inoculation of the population.

POSTFACTUM Reports Anthrax Outbreak in Yakutia

LD0209151893 Moscow Ostankino Television First
Channel Network in Russian 1400 GMT 2 Sep 93

[Text] Anti-Anthrax measures are in force in Yakutia. A POSTFAKTUM correspondent has learnt that the carcasses of about 50 animals who had died from anthrax were discovered in one of the rayons there. They were burnt the same day and hunting in Yakutia has been banned. This was a report by the POSTFAKTUM agency.

AZERBAIJAN

Ten Cases of Cholera Reported in Baku

NC0608143093 Yerevan SNARK in English 1228 GMT
6 Aug 93

[Text] Baku, August 6 (SNARK)—The Baku ambulance got about 10 sick people with the diagnosis—cholera—to the hospitals.

The water is polluted. There is no reagent (polyachrilamid) is being bought in Russia to clean the water.

ESTONIA

Infectious Hepatitis Engulfs Lezne-Viru District

LD0609081393 Moscow ITAR-TASS in English
0647 GMT 6 Sep 93

[By ITAR-TASS correspondent Albert Maloveryan]

[Text] Tallinn September 6 TASS—An epidemic of infectious hepatitis has engulfed the Lezne-Viru district of the Estonian Republic. According to the local sanitary-epidemic service the number of victims is more than 200 people.

Outbreak of Jaundice Epidemic in Laane-Viru County

WS0609144193 Tallinn ETA NEWS BULLETIN
in English 0757 GMT 6 Sep 93

[From 6 September HOMMIKULEHT, p 4]

[Text] Monday, September 6—An epidemic of jaundice has broken out in the Laane-Viru County, 200 people have been infected so far. The epidemic broke out in the small town of Smeru and has reached Rakvere and Vaike-Maarja. According to preliminary information, it was caused by contaminated water. But the county health service warns that a secondary outbreak may be expected, as the disease will be carried on by the infected people. The county government charged the health inspection staff with checking the state of the water purification facilities of Smeru. The local inhabitants were warned against drinking raw water.

KAZAKHSTAN

Cholera, Plague Registered in Almaty

LD3007120393 Moscow Mayak Radio Network
in Russian 1000 GMT 30 Jul 93

[Text] Several cases of cholera and one case of plague have been registered in Almaty. Citizens have been expecting such a situation for a long time as the city is drowning in trash, and food waste is not being removed.

LITHUANIA

Two Cases

WSI1081202
Vilnius BNS in English 1927 GMT
10 Aug 93

[Text] Vilnius, Aug 10, BNS—Two cases of diphtheria were registered in Lithuania's second city, Kaunas, the country's first incidents of diphtheria this year.

A woman and her 11-year-old daughter went to a physician after 2 days of acute symptoms. The girl is in questionable condition, said doctors.

Diphtheria is an acute infectious disease marked by high fever and difficult breathing.

Physicians speculate that the two may have caught the illness in St. Petersburg during a visit with a recent diphtheria patient.

The newspaper Lietuvos rytas reports that Lithuania registered nine cases of diphtheria last year. Most of those patients had come in contact with citizens from CIS states of Russia, Ukraine and Belarus. Russia had 3,000 reported cases of diphtheria last year; the rate more than doubled in the first quarter of this year, according to statistics.

The greatest number of such cases was registered in St. Petersburg: in the first 6 months of the year, 800 people were infected with diphtheria; 18 of those died.

TAJIKISTAN

Deputy Minister Calls Talk of Cholera Epidemic 'Premature'

PMI1080945 Moscow IZVESTIYA in Russian 4 Aug 93
Second Edition p 5

[Text] Anatoliy Kopyltsov, Tajik deputy health minister, has called the reports of a cholera epidemic in Tajikistan somewhat premature. Although there is a certain amount of tense expectation in this respect, it is impossible to give an unequivocal answer at the moment—this will be done during the next 10 days.

According to Kopyltsov, the following situation has developed. Since the second 10-day period in July there have been cases of diarrhea—that is, stomach upsets—among refugees returning home from Afghanistan. Insofar as around 3,000 cases of cholera have been recorded in Afghanistan's northern provinces, the possibility of its appearing on Tajik territory too cannot be ruled out. Especially as the diarrhea is widespread among people returning home by an unofficial route: They are crossing the Pyandzh on the border in places where it is "transparent" using any improvised means and are evading quarantine control, unlike those who are returning officially via Termez.

The cholera vibrio has not yet been unequivocally isolated not only because it is quite hard to distinguish from a multitude of others which are widespread and do not present a threat to the population's lives, but also because there is a lack of standard diagnostic and

medicinal kits and necessary medicines, which are distributed literally piecemeal. This year it was not possible to procure them in sufficient quantities because of the ending of payments between Tajikistan in Moscow [as published], as a result of which the republic has not received the necessary resources for diagnostics and treatment to the tune of approximately 700 million rubles. It has now appealed to international organizations, UNICEF in particular, requesting the promised aid.

The situation is complicated by hunger in the border areas. It is known that nutritional disorders can cause symptoms similar to the manifestation of cholera. But the specialized institute is located in Almaty, which lengthens the time taken to make a precise diagnosis. On the whole statistics concerning diarrhea illnesses do not differ from the average long-term statistics, and there are no grounds for panic yet.

Nevertheless the latest assault team has set off from Dushanbe to Pyandzhskiy and Kolkhozabadskiy Rayons, where similar cases have also appeared. It includes medics and specialists of the special rescue detachment formed 3 years ago after the earthquake in Sharor—which killed thousands of inhabitants of two villages—and led by Yuldash Tursunov, an experienced climber and mountain rescuer. The rescuers' task now is to urgently put into operation the drinking water purification equipment received from the FRG. This is task number one, because most of the 23 artesian wells have been put out of action as a result of the border fighting. Ten deep-well pumps have been allocated to restore them.

The last time cholera was observed on Tajik territory was 1971 in Shaartuzskiy Rayon.

Intestinal Epidemic Spreads in Badakhshan Oblast

LD2907152793 Dushanbe Radio Network in Tajik 0400 GMT 29 Jul 93

[Text] The Soviet of Peoples Deputies and the Executive Committee of Badakhshan Oblast have adopted a joint resolution on urgent measures to prevent the spread of intestinal diseases. It should be said that this was a timely decision because an unpleasant epidemic situation has arisen in many rayons of the oblast. Dreadful intestinal diseases are spreading in the Darvaz, Shugnan, Ishkashim, and Rashtkala Rayons. Some patients have died of dysentery.

An extraordinary commission has been set up for the prevention of such diseases. Similarly an oblast headquarters has been established to coordinate measures. The commission has informed the rayon executive committees on the causes of such dreadful diseases. In view of the commission members the causes for the spread of such diseases in rayons of the oblast in addition to the inadequate local sanitary conditions is refugees returning from Afghanistan to Badakhshan. It should be said that proper conditions have not been provided in Ishkashim border crossing for refugees to be examined.

The republican government is also adopting emergency measures to prevent the spread of such diseases. The Health Ministry of the republic has sent medicine worth 45 million rubles to Khorog. The international organization Medecins Sans Frontiere and the International Red Cross Committee are also taking part in this campaign.

UKRAINE

Typhoid Fever Epidemic Breaks Out in Transcarpathia

AU0109103993 Kiev DEMOKRATYCHNA UKRAYINA in Ukrainian 28 Aug 93 p 1

[Unattributed report: "Typhoid Fever in Svalyava"]

[Text] For residents of Svalyava [in Transcarpathia], the last days in August, even the festival days were full of anxiety. Many people there contracted typhoid fever. For example, on the eve of Independence Day, more than 80 people were hospitalized. All of them are receiving expert medical care. Unfortunately, one woman, who did not go to the doctor in time, died.

Outbreak of Anthrax Reported on Border With Moldova

LD240801993 Kiev UNIAR in Ukrainian 0715 GMT 24 Aug 93

[Text] Kalushany, Moldova, 23 Aug—An outbreak of anthrax was registered among livestock. Ukrainian border guards received an order not to allow meat and milk cargo from Moldova into Ukraine. Intensive work is being done to isolate farms, milk storage units, and meat combines in

the Ukrainian oblasts next to the Moldovan border. Sanitary groups are working in these areas.

UZBEKISTAN

Cholera Epidemic Warning Issued

Epidemiology Chief Issues Warning

PM2307142993 Moscow IZVESTIYA in Russian 23 Jul 93 First Edition p 1

[INTERFAX report: "Uzbekistan Fears Cholera Epidemic"]

[Text] Shanasyr Shavakhabov, director of Tashkent's Scientific Research Institute of Epidemiology and Microbiology, issued a warning to the population on national television Thursday [22 July] about the danger of a cholera epidemic.

He announced that cholera embryos had been discovered in a number of areas—rivers and reservoirs in Tashkent and Bukhara Oblasts and Karakalpakstan—which creates an increased risk of an epidemic of this dangerous disease.

30 People Hospitalized; Kazakhstan Concerned

LD1508104993 Moscow Radio Rossii Network in Russian 0900 GMT 15 Aug 93

[Text] The YEZHEDNEVNAYA GLASNOST news agency reports that a cholera epidemic has been registered in Uzbekistan. Up to 14 August 30 people had been hospitalized and several people had already died. Health workers in Kazakhstan are concerned that the epidemic in Uzbekistan could be a threat to the health of the population in Kazakhstan's neighboring South Kazakhstan Oblast.

REGIONAL AFFAIRS

Reaction to Tuberculosis Threat in Finland, Sweden

93WE0535A Helsinki HELSINGIN SANOMAT in Finnish 27 Jul 93 p 6

[Article by Kyosti Parssinen: "Swedes Frightened by New Tuberculosis Strain"]

[Excerpts] There is fear in Sweden about a new, resistant tuberculosis strain having reached Sweden. Three cases of tuberculosis have been discovered that were untreatable by the four most common antibiotic-based treatments. In addition to these, there have been eight TB cases in which the disease proved to have an effective resistance against two or three different medicines.

Tuberculosis can still be found in Finland also, but docent Martti Valle from the virus vaccine laboratory of the People's Health Institution does not consider the news of a new tuberculosis strain to be very alarming.

"For decades we have known about the evolving of medicine-resistant bacteria strains, but the disease has then been controlled by different combinations of medicines," Valle says.

The Swedish cases were recently reported by the SVENSKA DAGBLADET. This newspaper went so far as to label the strain that was resistant to the most common medicines as being "incurable." The newspaper makes no mention of experimentation with combinations of medicines. [passage omitted]

In Finland the infectious diseases act makes it possible even to make treatment compulsory for a patient, while, in the United States, the individual's freedom is given greater respect. Diseased persons can avoid treatment and might even slip out into a different state.

If treatment with antibiotics is interrupted the disease becomes more resistant. The curing of a more resistant disease may then be more difficult because of increased side effects for the medicines and because of decreased potency of the medicines.

The migration of resistant strains to, for example, Europe is not likely since the few persons suffering from TB do not usually take trips from one continent to another.

Finnish foreign exchange students have also run into tuberculosis scares in the United States. Because of earlier vaccinations in their homeland, the Finns have been found to have tuberculosis bacteria in their system and have, therefore, been suspected disease bearers.

Tuberculosis has not been completely wiped out even in the industrialized countries and, actually, the disease is becoming more widespread. Discoveries of the disease in 1990 in industrialized countries totaled 30 for every 10,000 persons, and two people in every 10,000 died from tuberculosis. Some 772 new cases were discovered in Finland in 1990, but this number reflects a continuing decrease.

The tuberculosis situation in the developing countries is worse than in the industrialized countries. One-third of the people in the world are carriers of tuberculosis bacteria, and, for example, in Africa, 105 persons in 10,000 died from the disease in 1990. Migration patterns are increasing the incidence of tuberculosis in the industrialized countries as well.

Martti Valle points out that, during World War II, virtually all Finns were infected, but the infections did not even nearly always lead to the emergence of the disease. Many people born during the war still have little deposits of calcium in their lungs and these are evidence of a TB spot that was healed.

Finnish children are still vaccinated against tuberculosis.

AUSTRIA

Study Predicts Number of Tuberculosis, Malaria Cases

93WE0492B Vienna DIE PRESSE in German 16 Jun 93 p 9

[Article by Claudia Richter: "No Anxiety About Return of Malaria to Europe—Tuberculosis Sure to Rise in Industrial Nations"]

[Text] No new malaria regions have been reported over the past several years; but tuberculosis has been spreading—for the time being only among those infected with HIV.

At present there are some 7.1 new million cases of tuberculosis worldwide annually, and about 2.6 million individuals die of the disease year after year. Tuberculosis "will very definitely increase further," says Prof Dr Heinrich Stemberger, the director of the Vienna Institute for Solar and Tropical Medicine. To be sure, the disease primarily strikes those infected with HIV because their immune system has been weakened. For now, most cases occur in tropical countries.

The Example of Zambia

In Zambia, 60 percent of those afflicted with tuberculosis are also HIV-positive. But among drug addicts the rate is steadily increasing as well. In 1988, "only" 73 out of 100,000 addicts in Baltimore suffered from tuberculosis. In 1992, the number had risen to 232. But even if people merely live close together, the danger of infection increases rapidly. In California, 17.4 persons out of a general population of 100,000 are infected with the tuberculosis bacillus; but in prisons more than 10 times as many, i.e. 184, are.

As a consequence of HIV infections tuberculosis is extremely likely to increase in the industrialized nations as well. What about Austria? Since this country is not a high-infection HIV area, it will be spared to some extent.

The tuberculosis vaccine BCG has been in use worldwide since 1921. By now, about 3 billion individuals have been immunized with it. The success rate has been high in the industrialized nations where a marked decline has taken

place. But it has been virtually ineffectual in the developing countries where hardly anything has changed. According to Stemberger, "this means that the vaccine itself is not very effective against an infection and that it probably has a minor impact on the incidence of tuberculosis in our region." But the vaccine apparently does protect against serious illness though not against infection as such.

In other words, it would not make much sense to immunize all HIV-positive persons against tuberculosis as a preventive measure. Stemberger thinks that prophylactic treatment would be a better idea. But even therapy is becoming increasingly difficult because resistance problems are gradually lessening the effectiveness of the tuberculosis drugs. It is therefore doubtful whether the claim can be supported that 3,000 deaths could be prevented, if 10,000 HIV-infected persons were given tuberculosis drugs. Another question which cannot be answered is when tuberculosis, which has been on the rise primarily among HIV-infected persons, will begin to affect the general population.

2 Million Deaths

We need not fear a return of malaria to Europe. There are 200 million new cases of the disease worldwide annually and almost 2 million deaths. Even though some parasitologists believe that the anopheles mosquitoes may increasingly settle in Europe once again as part of global warming, that is only one aspect of the problem. There are others, e.g. in 1953, there were some 1,000 "homegrown" cases of malaria tertiana in Austria and now about 100 cases are brought into the country each year—while the number of unreported cases may be four times as great.

Getting back to the climate: for the plasmodia (unicellular organisms which cause malaria) to develop inside the mosquitoes certain minimum temperatures must be reached during the summer. The medium temperature the virus that causes malaria tertiana requires for growth is 16 degrees centigrade—a temperature that was easily reached during the past hot summers in this country. The virus that causes the deadly malaria tropica needs temperatures of more than 20 degrees to grow, however.

No Animal Reservoir

In addition, malaria could return only if there were many plasmodia-infected individuals. Only then would the mosquito population have a source for the infection, i.e. infected individuals—because there is no such thing as an animal reservoir in the case of malaria which affects human beings.

It would also take a complete breakdown of our health system and, as a consequence, the inability to treat malaria cases. If recognized early enough, however, all cases of malaria are curable. Worldwide, no new malaria regions

have appeared over the past several years. The higher number of infections is due to the large increases in the populations of the endemic regions.

DENMARK

Salmonella Report For June, Early July

93WE0513B Copenhagen BERLINGSKE TIDENDE
in Danish 22 Jul 93 p 4

[Unattributed article: "Salmonella Goes Up And Down"]

[Text] There have been fewer infections due to the bacterial strain salmonella infantis, but more cases of two other types, according to figures for June and early July from the Serum Institute.

FINLAND

Finland Issues Warning on Trichinosis

Deaths in Jarvamaa

93WE0553A Helsinki HUFVUDSTADSBLADET
in Swedish 5 Aug 93 p 6

[Unattributed article: "Warning on Estonian Pork"]

[Text] The Agriculture and Forestry Ministry is calling on Finns who visit Estonia to avoid meat from pigs and wild boars due to the danger of trichinosis in this type of meat. Several dozen cases of trichinosis have been reported in Jarvamaa in northern Estonia, and four persons have died.

Trichinosis is the disease that strikes people who have eaten meat containing the parasitic nematode trichinella spiralis, which is found primarily in rats and pigs, but also in dogs, cats, and bears. Pigs brought up under poor hygienic conditions may have come in contact with trichinae. The same is true of wild boars. The symptoms of trichinosis are stomachache, vomiting, and diarrhea. This is followed by swelling around the eyes and painful breathing, once the parasites have spread to the muscle tissues. The symptoms generally come within several days after infection.

Consequently, the Agriculture and Forestry Ministry recommends avoiding all meat products containing pork or boar meat in Estonia. Wild boar meat is commonly found at markets in Estonia. It is prohibited to bring Estonian meat products into Finland. Nonperishable meat products can be imported, although there is a 15 kg limit without an import license.

All meat sold in Finland is inspected and guaranteed free of trichinae. Last year, for example, trichina inspections of over 2 million pigs slaughtered annually revealed only nine pigs infected with trichinae from five different breeders.

The trichinae die if the meat is heated up to at least 80 degrees during preparation or if it is frozen to minus 25 degrees for at least 20 days.

Estonian Officials Issue Denial

*93WE0553B Helsinki HUVUDSTADSBLADET
in Swedish 7 Aug 93 p 6*

[Unattributed article: "Trichinosis Warning Was Justified"]

[Text] Wednesday's warning from the Agriculture and Forestry Ministry against eating meat from Estonian pigs and boars was not a symptom of a "policy that supports protective tariffs," the ministry announced on Friday [6 August]. Rather, it was based on authentic reports of trichinosis cases in Estonia.

The Agriculture and Forestry Ministry pointed out in a communique that the import of pork from Estonia was prohibited due to the present danger of animal diseases. The prohibition is based on the desire to keep Finland free of swine fever.

On Thursday the Estonian Veterinary Board denied the reports published in the Finnish mass media regarding trichinosis in Estonian pork. The Veterinary Board accused Finland of imposing a policy of protective tariffs.

The Agriculture and Forestry Ministry in Finland stressed that the risk of trichinosis alone was not sufficient cause for banning the import of Estonian pork, but it indicated that Estonian pork was being smuggled into Finland and that it could be offered for sale to stores and restaurants.

The Agriculture and Forestry Ministry also wants to inform potential travelers to Estonia that it is uninspected pork that may contain trichinae.

IRELAND**Mystery Flu-Like Illness Puzzles Physicians**

*93WE0547A Dublin IRISH INDEPENDENT
in English 23 Jun 93 p 12*

[Article by Fergal Bowers, senior reporter with Irish Medical News: "Hunt Is On for the Mystery Bug"]

[Text] At this time of year, most doctors expect to be dealing with cases of hayfever, sunburns and minor colds. However, a new "mystery bug" sweeping the country has confounded the experts and resulted in a rush to chemists for cough mixtures and throat lozenges.

Doctors expect to know within a week or so the nature of the bug following laboratory tests. Among the main symptoms are severe sore throats, extreme tiredness and severe malaise. Family doctors have reported many cases of patients being struck down by the bug for days or even weeks on end.

Samples of the microbe have now been sent for laboratory examination, according to Dr. Howard Johnson of the Eastern Health Board's Bugwatch programme.

Flu or flu-type outbreaks are usually confined in this country to mid-autumn or late winter. These outbreaks particularly affect elderly people who can be placed at great risk if not vaccinated.

The last major flu epidemic in Ireland occurred in the winter of 1989-90 and prompted a beds crisis in the health service. Casualty units were inundated with patients. The country's eight health boards are responsible for the supply of flu vaccines for GMS patients at high risk.

According to new figures, last year 17 people died from influenza and most were women. As a sharp indicator of the risk influenza poses for older people, 15 of the deaths last year were in those aged 75 years and over.

One of the problems with a 'flu vaccine is that there is no use in giving any vaccine until it is known which virus is causing the infection. The type of virus varies from year to year, and the protection given by the vaccine does not extend beyond a year. For this reason it is essential to determine the precise cause of the latest round of illnesses.

So, what causes a summer outbreak of a mystery bug? One element missing from recent years is the very unusual weather we have been experiencing in recent months. Warm, humid wet weather promotes the growth and spread of infection and living organisms like microbes.

"The odd weather of the last while cannot be ruled out as a factor. Specimens of the bug have been taken and swabs sent for laboratory analysis," Dr. Howard Johnson said.

The sudden changes in the weather also mean that people are often found wearing inappropriate clothing—too warm or too cold, which is bad for the body system.

There are conflicting reports surrounding the bug epidemic. The head of UCD's Virus Reference Laboratory, Professor Irene Hillary, says she has seen no significant increase in flu or flu type cases.

"We don't usually see flu outbreaks until September time at the earliest. The impact of any virus outbreak at this time of year would be considerably lessened, with schools off for the summer holidays," she added.

Most of the cases currently being dealt with at the National Virus Reference Laboratory involve hepatitis, suspected hepatitis and AIDS tests.

Prof Hillary said a number of GPs had been in contact with the laboratory in recent days reporting groups of patients being struck down by illness.

"Most of the patients appear to have colds for around two days and quickly recover. However, unless these doctors send in samples to the lab, I cannot explain the cause," she said.

One of the first jobs is to determine whether this latest illness is caused by a virus or bacteria. The nature of such bugs is that they can be carried across the country within days, spreading like wildfire.

The bugwatch monitoring system involves around 12 GPs in the Eastern Health Board area. It provides for an early alarm system for infections which could result in large epidemics.

"If there is a problem in Dublin, it does not usually take long to emerge elsewhere. Most main cities would be

affected," Dr. Howard Johnson said. "The more dramatic an outbreak is, the faster we usually hear about it."

At this early stage, many doctors remain sceptical that an epidemic is looming or in train. This time of year, with exams underway, many people, in particular students and parents, visit their GP with non-specific illness. Long spells of poor summer weather can result in general depressed mood, says doctors.

South Dublin GP Dr. Paul Carson said that, while a number of patients were complaining of flu type illnesses the numbers were no greater than usual. "I am not seeing any particular surge in cases," he added.

It could be that many people with the bug are treating themselves with over-the-counter drugs and medicines from chemists rather than going to their GP—hence the conflicting reports on the scale of the mystery bug.

While the doctors and laboratory scientists try to unravel the exact cause of the latest round of "bed cases," the most sensible advice is to give people apparently infected a wide berth.

UNITED KINGDOM

Tuberculosis Center Launched, Epidemic Feared

93WE0543A London *THE DAILY TELEGRAPH*
in English 29 Jul 93 p 8

[Article by David Fletcher, health services correspondent:
"Epidemic Fear Prompts Launch of TB Centre"]

[Text] Rapidly rising numbers of people suffering from tuberculosis have prompted doctors to set up a centre in London to treat the disease, regarded until recently in the West as an illness on the verge of extinction.

They said drug-resistant strains of TB were already appearing in British patients, following the trend seen in America, and preparations must be made to combat a TB epidemic.

The doctors called on health authorities which have dropped routine vaccination of children because they thought TB was no longer a danger, to re-start it immediately.

The number of cases in Britain has been rising steadily over the last few years and Dr John Moore-Gillon, consultant chest physician at Bart's hospital, said that for the first time in many years they would exceed 6,000 this year. The centre is being set up at the London Chest Hospital in conjunction with Bart's and the Royal London following steep increases in the incidence of TB in east London.

Only five people in 100,000 suffer from TB nationally but in some parts of east London the proportion is as high as 160 per 100,000.

Dr Moore-Gillon said: "The public perception is that TB is dead and gone, but it is not. It is alive and well and living in east London and in the deprived areas of other cities.

"We must act now to prevent the health disaster in New York from tuberculosis being repeated in London."

The centre, which will provide up-to-date skills in treating the disease, also aims to educate the public about TB risks and encourage greater awareness of them by doctors and nurses. Measures will include courses for doctors, research into new treatment, patient information leaflets and public talks by TB specialists.

Sixteen health authorities—about one in 12—have stopped routine BCG vaccinations.

TB, like colds or flu, is caught from other people and commonly affects the lungs. It is a disease traditionally associated with poverty and overcrowded housing.

Those worst affected are recent immigrants from Asia, drug addicts, AIDS patients whose immune systems are damaged and the prison population.

The World Health Organisation took the unprecedented step last April of declaring TB a "global emergency" and warned it could claim 30 million lives worldwide over the next decade unless action is taken to curb its spread.

Plague of Midges Threatens Grain Crops

93WE0524 London *THE DAILY TELEGRAPH*
in English 12 Jul 93 p 18

[Article by David Brown]

[Text] A plague of midges is threatening wheat crops. Some farmers fear that their yields may be cut by as much as 30 percent.

The worst infestation of orange and lemon blossom midges for nearly 40 years is a blow to British farmers who stand to gain from the severe flooding which has destroyed vast areas of crops in the United States and brought warnings that food prices there could rise by three percent.

Despite the ravages of the midges, mainly in the North-East and East of England, the Ministry of Agriculture and the National Farmers Unions said last night that it was too early to assess the damage.

An NFU spokesman said that estimates that wheat losses might run to three million tons this year were exaggerated but added: "Pests are a matter for concern."

Record numbers of the larvae of the midges survived the winter to attack fields of cereals.

Farmers spray to control the midges, which are endemic in this country, as a matter of routine. But it appears that many under-estimated this year's attack and did not use enough chemicals early enough in the growing season.

Many farmers have been spraying their crops in recent weeks in an effort to minimise the damage but it is feared that their efforts are too little too late.

The quality of bread-making wheat, in particular, is under threat.

END OF

FICHE

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